

NIGERIA
HIV/AIDS
INDICATOR AND
IMPACT SURVEY

2018
TECHNICAL
REPORT

PARTNERS



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NIGERIA HIV/AIDS INDICATOR AND IMPACT SURVEY (NAIIS) 2018

TECHNICAL REPORT

NAIIS 2018 COLLABORATING INSTITUTIONS

Federal Ministry of Health, Nigeria (FMoH)
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National Population Commission, Nigeria (NPopC)
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CONTACT INFORMATION

Federal Ministry of Health
New Federal Secretariat Complex
Phase 3
Ahmadu Bello Way
PMB 083 Garki, Abuja
Phone: +234 9 5238362
Email: info@nigeria.gov.ng
Website: www.health.gov.ng

National Agency for the Control of AIDS
No.3 Ziguinchor Street
Wuse Zone 4, Abuja
Phone: +234 9 4613726
Email: info@naca.gov.ng
Website: www.naca.gov.ng

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GLOSSARY OF TERMS

90-90-90 targets: According to the United Nations Programme on HIV and AIDS (UNAIDS), by 2020, 90% of all people living with human immunodeficiency virus (HIV) will know their HIV status; 90% of all people with diagnosed HIV will receive sustained antiretroviral therapy (ART); and 90% of all people receiving ART will have viral load suppression.

Acquired Immunodeficiency Syndrome (AIDS): AIDS is a disease that can develop after HIV causes severe damage to the immune system, leaving the body vulnerable to life-threatening conditions, such as infections and cancers.

Adolescents: Unless otherwise noted, adolescents are individuals aged 10-19 years. Young adolescents are individuals aged 10-14 years; older adolescents are individuals aged 15-19 years.

Adults: Unless otherwise noted, adults are individuals aged 15-64 years.

Antiretroviral (ARV): A type of medication used to treat HIV.

Antiretroviral therapy (ART): Treatment with ARV drugs that inhibit the ability of HIV to multiply in the body, leading to improved health and survival among people living with HIV.

CD4+ T-Cells (CD4): CD4+ T-cells are white blood cells that are an essential part of the human immune system. These cells are often referred to as T-helper cells. HIV attacks and kills CD4 cells, leaving the body vulnerable to a wide range of infections. The CD4 count is used to determine the degree of weakness of the immune system from HIV infection.

Children: Unless otherwise noted, children are individuals aged 0-14 years.

De facto household resident: A person who slept in the household the night prior to the survey.

De jure population: Individuals who are usual residents of the household, irrespective of whether they slept in the household on the night prior to the household interview.

Emancipated minor: As defined by law in Nigeria, an individual less than aged 18 years who is married or is free from any legally competent representative.

Enumeration area (EA): A limited geographic area defined by the National Population Commission (NPopC), the national statistical authority and the NAIIS primary sampling unit.

Head of household: The person who is recognized within the household as being the head and is aged 18 years and older or is considered an emancipated minor.

Human Immunodeficiency Virus (HIV): HIV is the virus that causes AIDS. The virus is passed from person to person through blood, semen, vaginal fluids and breast milk. HIV attacks CD4 cells in the body, leaving a person living with HIV vulnerable to illnesses that a healthy immune system would have eliminated.

HIV incidence: A measure of the frequency with which new cases of HIV occur in a population over a time period. The denominator is the population at risk; the numerator is the number of new cases that occur during a given time period.

HIV prevalence: The proportion of persons in a population who are living with HIV at a specific point in time.

HIV viral load (VL): The concentration of HIV in the blood, usually expressed as copies per milliliter (mL).

HIV viral load suppression: An HIV VL of less than 1,000 copies per mL.

Household: A person or group of persons related or unrelated to each other who live in the same compound (fenced or unfenced), share the same cooking arrangements and have one person whom they identify as head of that household.

Informed consent: Informed consent is a legal condition whereby a person can give consent based upon a clear understanding of the facts, implications and future consequences of an action. In order to give informed consent, the individual concerned must have adequate reasoning faculties and be in possession of all relevant facts at the time he or she gives consent.

Male circumcision: Male circumcision is the removal of some or the entire foreskin (prepuce) from the penis. Medically supervised adult male circumcision is a scientifically proven method for reducing a man's risk of acquiring HIV through heterosexual intercourse.

Nigeria: The Federal Republic of Nigeria.

Prevention of mother-to-child HIV transmission (PMTCT): Mother-to-child HIV transmission (MTCT) is when an HIV-positive woman passes the HIV virus to her baby during pregnancy, labor or delivery or while breastfeeding. The United Nations recommends effective PMTCT to include a four-fold approach: (1) primary prevention of HIV infection among women of childbearing age; (2) preventing unintended pregnancies among women living with HIV; (3) preventing HIV transmission from women living with HIV to their infants; and (4) providing appropriate treatment, care and support to mothers living with HIV and their children and families.

Sexually transmitted infections (STIs): STIs are infections transmitted from person-to-person through sexual contact. They are sometimes called sexually transmitted diseases.

Tuberculosis: Tuberculosis (TB) is a contagious bacterial infection caused by Mycobacterium tuberculosis which mostly affects the lungs.

Young adults: Unless otherwise noted, individuals aged 20-24 years are defined as young adults.

Young people: Defined in this survey as the population of individuals aged 15-24 years (including older adolescents and young adults).

LIST OF ABBREVIATIONS

AFENET	African Field Epidemiology Network
AIDS	Acquired Immunodeficiency Syndrome
AIMS	Activity Information Management System
ANC	Antenatal care
ART	Antiretroviral therapy
ARV	Antiretroviral
CAPI	Computer Assisted Personal Interview
CDC	Centers for Disease Control and Prevention
CFR	Code of Federal Regulations
CHAID	Chi-square automatic interaction detection
CI	Confidence interval
CSPro	Census and Survey Processing System
DBS	Dried blood spot
DHS	Demographic and Health Survey
DNA	Deoxyribonucleic acid
DR	Drug resistance
EA	Enumeration area
EIA	Enzyme immunoassay
EID	Early infant diagnosis
FCT	Federal Capital Territory
FMoH	Federal Ministry of Health
FTPS	File Transfer Protocol Secure
GF	The Global Fund to Fight AIDS, Tuberculosis and Malaria
GoN	Government of Nigeria
HBTC	Home-based testing and counseling
HBsAg	Hepatitis B virus surface antigen
HBV	Hepatitis B virus
HCV	Hepatitis C virus
HIV	Human immunodeficiency virus
HIVDR	Human immunodeficiency virus drug resistance
ICC	Intra-cluster correlation
IHVN	Institute of Human Virology Nigeria
IRB	Institutional review board

IVT	Infant virologic HIV testing
LAG	Limiting antigen
LGAs	Local Government Areas
MDRI	Mean duration of recent infection
mL	Milliliter
MS	Mass spectrometry
NACA	National Agency for the Control of AIDS
NAIIS	Nigeria HIV/AIDS Indicator and Impact Survey
NASCP	National AIDS and STI Control Program
NBS	National Bureau of Statistics
NCDC	Nigeria Centre for Disease Control
NHREC	National Health Research Ethics Committee
NPoPc	National Population Commission
NRL	National Reference Laboratory
ODn	Normalized optical density
PCR	Polymerase chain reaction
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PFR	Proportion false recent
PHIA	Population-based HIV Impact Assessment
PLHIV	People living with HIV
PMTCT	Prevention of mother-to-child HIV transmission
POC	Point of care
PSU	Primary sampling unit
PT	Proficiency test
PTID	Participant identification
QA	Quality assurance
QC	Quality control
RNA	Ribonucleic acid
RSEs	Relative standard errors
SOP	Standard operating procedure
TB	Tuberculosis
TNA	Total nucleic acid
UMB	University of Maryland, Baltimore
UNAIDS	Joint United Nations Programme on HIV/AIDS
VL	Viral load
VLS	Viral load suppression
WHO	World Health Organization
µL	Microliter

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FOREWORD

The Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS) 2018 is the largest HV population-based survey conducted globally with a sample size of 83,909 households and 383,574 individuals and coverage across 36 states (and the Federal Capital Territory). NAIIS determined the HIV incidence, HIV prevalence, viral load suppression and risk behaviours. For the first time, we have estimated national HIV incidence and viral load suppression and the prevalence of hepatitis B and C virus infections. NAIIS also enabled determination of the effectiveness and population-level impact of HIV-related prevention, care and treatment interventions implemented in the country, and our progress towards the achievement of the UNAIDS 90-90-90 targets.

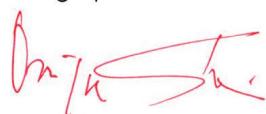
The findings show steady improvements in reducing HIV prevalence, when compared to previous survey estimates. However, gaps remain in awareness of HIV status. The results also show varied HIV prevalence across states and highlights the need for more responsive approaches that take into consideration the situation of the epidemic in each state. The findings in relation to new HIV infections point us towards the need to increase our efforts in targeted testing at community-level, especially in areas with high HIV prevalence and low testing coverage.

While significant progress has been achieved in the overall coverage of ART for People Living With HIV and viral load suppression for those on ART, sustained efforts will be required, to maintain the gains and continue to decrease the risk of transmission of HIV.

One of the key lessons from the results of this survey is that we must continue to invest in addressing the important gender dimensions of access to HIV services, especially noting the difficulties women often experience in accessing health services.

NAIIS reiterates the importance of measuring progress in achieving epidemic control and strengthening capacity at country-level to collect and use surveillance data to inform and improve interventions as it relates to HIV and AIDS as well as Hepatitis B and C infections.

Overall, the results from NAIIS 2018 have provided Government and her partners with critical information to guide policy, programme and funding priorities and have bolstered the joint commitment to achieving epidemic control in Nigeria.



Dr. E. Osagie Ehanire MD, FWACS
Honourable Minister of Health

EXECUTIVE SUMMARY

Key Findings

- Approximately 8 new cases of HIV infection occur annually per 10,000 adults (those aged 15-64 years), with HIV incidence highest among women and men aged 25-34 years (Table 6.A).
- Overall, HIV prevalence among adults was 1.4%, with 1.8% in women and 1.0% in men (Table 7.A).
- Overall, HIV viral load suppression (VLS) prevalence among adults was 43.1%: 45.5% in women and 38.8% in men (Table 10.A).

UNAIDS 90-90-90 Targets

- **Diagnosed (antiretroviral (ARV)-adjusted awareness of HIV-positive status):** Based on self-report and ARV detection data, it is estimated that in Nigeria, 46.9% of persons living with HIV (PLHIV) aged 15-64 years were already aware of their HIV status (50.3% among women living with HIV and 40.9% among men living with HIV). This varied across age groups ranging from 31.0% among young people aged 15-24 years to 52.8% among adults aged 35-49 years (Table 11.B).
- **On treatment (ARV-adjusted treatment status):** Based on self-report and ARV detection data, it is estimated that among the PLHIV aged 15-64 years who were aware of their HIV status, 96.4% were receiving antiretroviral therapy (ART) (95.8% of women and 97.8% of men) (Table 11.B).
- **Viral load suppression (VLS):** Of the 96.4% of PLHIV aged 15-64 years on ART, based on self-report and ARV detection data, 80.9% had VLS, ranging from 75.2% among those aged 25-34 years (76.9% among women and 65.8% among men) to 82.0% among those aged 35-49 years (84.4% among women and 77.4% among men) (Table 11.B).

Other Key Findings

- In Nigeria, 3.1% of households had at least one HIV-positive member (3.3% in rural and 2.8% in urban households) (Table 4.D).
- Among heads of households, 1.9% of heads of households were HIV-positive (3.4% of female heads of households were HIV-positive compared to 1.3% of male heads of household) (Table 4.F).
- HIV prevalence among women of childbearing age (aged 15-49 years) who were pregnant at the time of the survey was 1.1% (Table 7.B).
- Overall, 30.1% of the adult population reported that they had ever tested for HIV and received their results, while 10.2% indicated that they had tested in the 12 months preceding the survey and received their results (Table 8.C).
- Concordance between self-report of ART and detection of ARVs was high among adults, with 94.5% of those who reported current ART use having detectable ARVs in blood. However, self-report of HIV status was less accurate, with detection of ARVs in blood among 24.4% of those who reported that they had not been previously diagnosed with HIV (Table 9.F).
- Among all HIV-positive adults aged 15-64 years, VLS ranged from 31.2% in those aged 20-24 years to 55.6% in those aged 50-54 years (Table 10.B).
- Among adult PLHIV who self-reported not to be aware of their HIV status and did not have detectable ARVs in their blood, 10% of women and 8.0% of men had severe immunosuppression, with a CD4 count less than 200 cells/microliter (μ L) (Table 12.B).
- Among HIV-positive adults who reported initiating ART within the 12 months prior to the survey, 95.2% reported that they were still taking ART at the time of the survey. Among those who reported initiating ART more than 12 months prior to the survey, 94.3% reported that they were still taking ART at the time of the survey (Table 12.C, Table 12.D).

- Among women of childbearing age (aged 15-49 years) who delivered in the three years preceding the survey, 76.3% had at least one antenatal care (ANC) visit (Table 13.A).
- Among women who delivered within the 12 months preceding the survey, 41.5% reported knowing their HIV status (Table 13.C).
- Among HIV-positive women who delivered within the 3 years preceding the survey, 84.3% of those who knew their HIV status received ARVs (Table 13.D).
- Among older adolescents (aged 15-19 years) and young adults (aged 20-24 years), 18.1% reported having sexual intercourse before the age of 15 years (20.1% among women and 14.9% among men) (Table 14.A).
- Among early adolescents aged 10-14 years, 1.4% correctly responded to all questions that assessed knowledge of HIV transmission and prevention (1.2% of women and 1.7% of men) (Table 14.B, Table 14.C, Table 14.D).
- Incidence of HIV infection among older adolescents (aged 15-19 years) and young adults (aged 20-24 years) was estimated to be 0.04% (95% confidence interval (CI): 0.01%-0.07%) (Table 6.A).
- HIV prevalence was 0.2% among older adolescents (aged 15-19 years) (0.3% in women and 0.1% in men) and 0.8% among young adults (aged 20-24 years) (1.3% in women and 0.3% in men) (Table 7.C).
- Progress on 90-90-90 targets among older adolescents (aged 15-19 years) and young adults (aged 20-24 years): Based on self-report and detection of ARVs in blood, 31.0% of HIV-positive persons aged 15-24 years were aware of their HIV-positive status prior to the survey (31.7% of women and 28.8% of men). Among those who had been previously diagnosed, 92.3% were on ART. Among those on treatment, 77.1% had VLS (Table 11.B).
- Among adults aged 15 to 64 years who reported having sex in the last 12 months, 14.0% of women and 33.5% of men reported having sex with a non-marital, non-cohabitating partner. Of these adults, 35.3% (26.3% of women and 39.7% of men) reported using a condom during their last sexual intercourse with a non-marital, non-cohabitating partner (Table 15.B, Table 15.C, Table 15.D).
- The overall prevalence of hepatitis B virus (HBV) infection among adults aged 15-64 years was 8.1%, with 10.3% in men and 5.8% in women (Table 16.A).
- The overall prevalence of hepatitis C virus (HCV) infection among adults aged 15-64 years was 1.1%, with 1.3% in men and 1.0% in women (Table 16.B).
- Overall, 9.9% of adult PLHIV had ever visited a clinic for tuberculosis (TB) evaluation. Among adult PLHIV who had ever visited a TB clinic, 40.4% were diagnosed with TB. Of these, 98.8% completed TB treatment (Table 16.C).

Gaps and Unmet Needs

- While overall HIV prevalence determined by NAIIS was lower than reported in previous surveys and estimates, HIV continues to be transmitted in Nigeria.
- Awareness of HIV status is low, only 46.9% of PLHIV either self-reported awareness of their HIV status or had detectable ARVs in their blood. This low rate of awareness hinders the achievement of 90-90-90 targets.

Programmatic Responses or Recommendations

- To ensure 90-90-90 targets are met, the Government of Nigeria (GoN), supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and The Global Fund to Fight AIDS, Tuberculosis and Malaria (GF), is implementing an ART Surge to identify PLHIV who do not know their status or are not in treatment and to provide effective treatment to help all persons reach VLS.
 - GoN is supporting an additional 100,000 PLHIV on treatment.
 - PEPFAR is supporting an additional 500,000 PLHIV on treatment.
 - GF is supporting an additional 110,000 PLHIV on treatment.
- States are helping to ensure efforts are successful by implementing policies that have been shown to improve access to services, including the removal of user fees for HIV-related services.

Conclusion

The results from NAIIS 2018 show varied HIV prevalence across states and underscore the need for effective approaches to addressing the epidemic, including targeted community-level testing efforts in areas with high HIV prevalence and low testing coverage.

In Nigeria, PLHIV on ART can achieve VLS, improving their lives and decreasing the risk of transmission of HIV. The results from NAIIS 2018 provide the Federal Ministry of Health (FMoH), the National Agency for the Control of AIDS, Nigeria (NACA) and their partners with critical information to reset the baseline data on HIV incidence and prevalence in Nigeria. The results have fostered cooperation and reinvigorated efforts across federal, state and international governments as well as donor and implementing organizations to halt the spread of HIV in Nigeria.

1. INTRODUCTION

1.1 Background

The Nigeria HIV/AIDS Indicator and Impact Survey (NAIIS) was a Population-based HIV Impact Assessment (PHIA) conducted to measure important national and regional HIV-related indicators, including progress toward the achievement of the UNAIDS 90-90-90 targets (UNAIDS, 2014) and to guide policy and funding priorities. PHIs are part of a multi-country project funded by the United States President's Emergency Plan for AIDS Relief (PEPFAR) to conduct national HIV-focused surveys that describe the status of the HIV epidemic.

With a projected 2016 population of over 180 million and an estimated 3.2 million people infected with HIV, Nigeria is estimated to have the second largest number of people living with HIV (PLHIV) in the world¹ and is among the six nations facing the triple threat of high HIV burden, low treatment coverage and slow decline in new HIV infections.² At the end of 2015, Nigeria had over 1,078 facilities providing ART services and over 853,992 PLHIV who had initiated ART.³ On average, an estimated 180,000 people die annually from AIDS-related illnesses and about 180,000 children aged 17 years or younger are currently orphaned by AIDS in Nigeria.⁴

NAIIS was led by the Government of Nigeria (GoN) under the Federal Ministry of Health (FMoH) and National Agency for the Control of AIDS (NACA). The survey was conducted with funding from PEPFAR and The Global Fund to Fight AIDS, Tuberculosis and Malaria (GF) with technical assistance from the U.S. Centers for Disease Control and Prevention (CDC). The survey was implemented by the NAIIS Consortium and led by the University of Maryland, Baltimore (UMB) under the supervision of the NAIIS Technical Committee.

1.2 Overview of NAIIS 2018

NAIIS, a household-based national survey, was conducted between July and December 2018 to assess the prevalence of HIV and related health indicators, including HBV and HCV infections. NAIIS offered home-based testing and counseling (HBTC) with return of results and collected information about households and individuals' background and the uptake of HIV care and treatment services. This survey is the first in Nigeria to estimate national HIV incidence and viral load suppression (VLS). The results provide information on national and regional progress toward control of the HIV epidemic. The survey also estimated the national prevalence of hepatitis B virus (HBV) infection, hepatitis C virus (HCV) infection, HBV/HIV co-infection and HCV/HIV co-infection.

Although previous HIV facility-based sentinel surveillance, population-based studies and programmatic data provided useful knowledge regarding Nigeria's HIV epidemic and HIV control efforts, current population-based information was critically needed to understand the current status of the epidemic and guide future interventions. NAIIS was designed to provide direct estimates of HIV infection risk and burden; the effectiveness and population-level impact of HIV-related prevention, care and treatment interventions implemented in the country; and Nigeria's progress toward the achievement of the UNAIDS 90-90-90 targets.

1.3 Specific Objectives

The goal of the survey was to estimate incidence and prevalence of HIV in Nigeria, to assess the coverage and impact of HIV services at the population level and to characterize HIV-related risk behaviors using a nationally representative sample of persons aged 15-64 years.

Primary Objectives

To estimate using a household-based, nationally representative sample of adults aged 15-64 years:

- National-level HIV incidence
- National- and state-level HIV prevalence
- National- and state-level prevalence of VLS; defined as HIV ribonucleic acid (RNA) less than 1,000 copies/mL of plasma

Secondary Objectives

To estimate among adults aged 15-64 years the:

- Prevalence of HIV-related risk behaviors, knowledge and attitudes
- Behavioral and demographic determinants of HIV incidence and prevalence
- National prevalence of HBV infection
- National prevalence of HCV infection
- Prevalence of HIV/HBV co-infection among HIV-positive individuals
- Prevalence of HIV/HCV co-infection among HIV-positive individuals

To estimate among the population of adults aged 15-64 and children aged 0-14 years the:

- Uptake of HIV-related services, especially prevention of mother-to-child HIV transmission (PMTCT)-related services and exposure to HIV interventions
- Distribution of CD4 T-cell counts among HIV-positive individuals

To estimate among children aged 0-14 years the:

- National paediatric HIV prevalence

1.4 References

1. Central Intelligence Agency. The World Fact Book. <https://www.cia.gov/library/publications/the-world-factbook/rankorder/2156rank.html>. Accessed March 10, 2019.
2. Joint United Nations Programme on HIV/AIDS (UNAIDS). The Gap Report. http://www.unaids.org/sites/default/files/en/media/unaiids/contentassets/documents/unaidspublication/2014/UNAIDS_Gap_report_en.pdf. Accessed March 10, 2019.
3. National Agency for the Control of AIDS (NACA), Nigeria. Fact Sheet Anti-Retroviral Therapy (ART). <http://naca.gov.ng/fact-sheet-anti-retroviral-therapy-art-2016/>. Accessed March 10, 2019.
4. Joint United Nations Programme on HIV/AIDS (UNAIDS). HIV and AIDS Estimates. <http://www.unaids.org/en/regionscountries/countries/nigeria>. Accessed March 10, 2019.

2. SURVEY DESIGN AND METHODOLOGY

NAIIS was a nationally representative, cross-sectional, two-stage, population-based survey of households across Nigeria. The target population was children (aged 0-14 years) and adults (aged 15-64 years) living in the community. The survey population excluded military bases and institutionalized children and adults.

2.1 Study Area

Nigeria lies on the west coast of Africa between latitudes 4°01' and 13°05' north and longitudes 20°40' and 14°04' east. It occupies approximately 923,768 square kilometers of land stretching from the Gulf of Guinea on the Atlantic coast in the south to the fringes of the Sahara Desert in the north. The country's 2006 Population and Housing Census placed its population at 140,431,790. Nigeria is the most populous black nation in the world. Nigeria is comprised of 36 states and the Federal Capital Territory (FCT) (Figure 2.A) with 774 Local Government Areas (LGAs), categorized into six geopolitical zones (North West, North East, North Central, South West, South East and South South). Nigeria has more than 500 ethnic groups with the most populous being Hausa, Yoruba and Igbo.

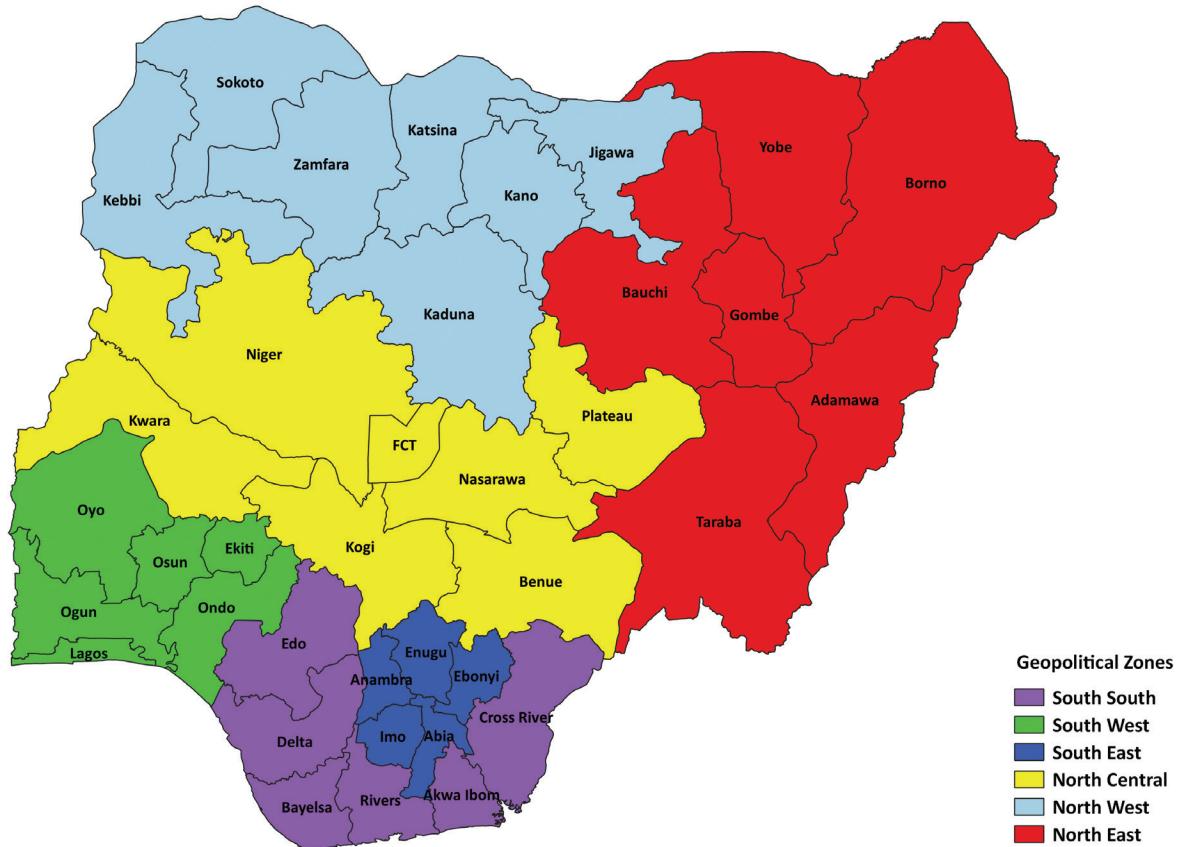


Figure 2.A The six geopolitical zones in Nigeria

2.2 Sampling Methods

NAIIS sampled the population using a two-stage cluster sampling technique, selecting enumeration areas (EAs) followed by households. The sampling frame consisted of 662,855 EAs, a total of 28,900,478 households and 140,431,798 persons based on the 2006 Census, with an average number of households and persons per EA of 44 and 212, respectively. The EAs were mutually exclusive (non-overlapping). This ensured that all households and residents had an equal chance of being included in the survey. Given the variability in household size across Nigeria (range of 4.0 to 5.7 individuals per household), state differences in household size based on the 2006 Census were considered when calculating the number of EAs or primary sampling units (PSUs) to be selected in each state.

The sample size was calculated to provide a representative national estimate of HIV incidence and HIV prevalence among adults aged 15-64 years with a relative standard error (RSE) less than or equal to 9% and 2%, respectively, as well as representative national and state estimates of VLS prevalence among PLHIV with 95% confidence intervals (CIs) between 10% and 15%. The sample size also was calculated to provide HIV prevalence estimates at the state level. One-quarter of the households were randomly selected for inclusion of children, which was designed to provide a representative national estimate of paediatric HIV prevalence with an RSE less than or equal to 0.1205%. The target sample size was 140,974 adults and 31,629 children, for an overall total of 172,603 adults and children.

The first stage of sampling selected 4,035 EAs using a probability proportional to size method. The 4,035 EAs were stratified by Nigeria's 36 states and the FCT. An equal-size approach was proposed with an estimated sample size of 3,700 blood specimens from each state. This number of blood specimens was sufficiently large to obtain robust estimates of HIV prevalence for the population and VLS among HIV-positive individuals in most states. The second stage selected a random sample of households within each EA using an equal probability method. The number of households selected per cluster was 28.

At the request of Lagos State, the NAIIS sample design was adjusted to oversample Lagos State to obtain stable estimates of HIV prevalence in 20 LGAs. The sample of 2,900 responding households with an anticipated 3,677 blood draws among adults aged 15-64 years was increased to a sample of 4,800 responding households with an estimated 6,087 blood draws among adults aged 15-64 years. Lagos State was the only state with a change in the sample design. The evaluation of this "equal-size" approach to the 37 strata, with the larger sample for Lagos State, is presented in Table 2.A.

Table 2.A Distribution of sampled enumeration areas and households by state

State	Total clusters sampled for the survey	Number of households sampled for the survey	Number of households sampled for inclusion of children aged 0-14 years	Number of households sampled for hepatitis B and C tests
Abia	101	2,828	601	233
Adamawa	88	2,464	582	265
Akwa Ibom	104	2,912	846	344
Anambra	100	2,800	875	347
Bauchi	87	2,436	845	411
Bayelsa	100	2,800	358	143
Benue	89	2,492	795	357
Borno	92	2,576	799	365
Cross River	106	2,968	641	242
Delta	103	2,884	888	356
Ebonyi	98	2,744	446	178
Edo	103	2,884	697	264
Ekiti	99	2,772	494	203
Enugu	105	2,940	717	275
FCT ¹	105	2,940	309	215
Gombe	86	2,408	424	203
Imo	101	2,828	828	342
Jigawa	89	2,492	811	354
Kaduna	89	2,492	1,133	513
Kano	82	2,296	1,615	817
Katsina	87	2,436	1,061	490
Kebbi	83	2,324	569	276
Kogi	92	2,576	637	277
Kwara	95	2,660	470	191
Lagos	600	5,400	2,215	777
Nasarawa	89	2,492	349	204
Niger	89	2,492	735	337
Ogun	112	3,136	877	324
Ondo	105	2,940	756	291
Osun	102	2,856	727	304
Oyo	107	2,996	1,249	491
Plateau	90	2,520	602	261
Rivers	103	2,884	1,125	455
Sokoto	88	2,464	685	312

Table 2.A Distribution of sampled enumeration areas and households by state (continued)				
State	Total clusters sampled for the survey	Number of households sampled for the survey	Number of households sampled for inclusion of children aged 0-14 years	Number of households sampled for hepatitis B and C tests
Taraba	91	2,548	435	201
Yobe	89	2,492	433	206
Zamfara	86	2408	591	281
Total	4,035	101,580	28,220	12,105

¹FCT – Federal Capital Territory.

2.3 Eligibility Criteria, Recruitment and Consent Procedures

The eligible survey population included:

- Adults aged 18-64 years and emancipated minors aged 15-17 years living in the selected households and adult visitors who slept in the selected household the night before the survey who were willing and able to provide written consent.
- Children and adolescents aged 10-17 years living in the selected households and visitors in the same age bracket who slept in the selected household the night before the survey who were willing and able to provide written assent and whose parents or guardians were willing and able to provide written permission for their participation.
- Children aged <10 years living in the selected households and child visitors in the same age bracket who slept in the selected household the night before the survey whose parents or guardians were willing and able to provide written consent for their participation.

Interviewers used tablets with an electronic informed consent form to collect consents from potential survey participants (Appendix H). All potential participants were given a printed copy of the consent form in either English, Hausa, Igbo or Yoruba, depending on their preference. Consent was recorded by signing or making a mark on the consent form on the tablet and on a printed copy retained by the participant. Consent processes were conducted in different stages. Written consent to participate in the survey was obtained from the identified household head, after which individual members were rostered during the household interview. Emancipated minors (aged 15-17 years) and adults provided written consent on the tablet separately for the interview and for participation in biomarker testing which included HBTC, return of rapid HIV test results, linkage to care (for identified positives) and CD4 counts during household visits. Receipt of test results was a requirement for participation in the biomarker component. If a participant did not want to receive his or her HIV test result, it was considered a refusal and the survey was concluded. Adults were also asked for written consent to store their blood specimens in a repository to perform additional tests in the future. Individuals with disabilities who were otherwise able to give written consent or provide a mark were offered survey participation. Procedures with illiterate participants or participants with a sight disability involved the use of an impartial witness, chosen by the potential participant, who also signed or made a mark on the consent form on the tablet and on the printed copy. If no witness could be identified, the potential participant or household, if the head of household was sight disabled or illiterate, was considered ineligible. Individuals who were unable to give consent due to cognitive impairment or intellectual disability were considered ineligible to participate.

Children aged 10-17 years were asked for assent to the interview and biomarker components after permission was granted by their parents or guardians. For minors below the age of assent (<10 years), consent was obtained from their parents or guardians for biomarker testing. In both cases, when a parent or guardian refused receipt of the child's HIV test result, it was considered a refusal and the survey was concluded.

2.4 Survey Implementation

Training of Field and Laboratory Staff

Survey staff received training on all contents of the data collection instruments, tablet use, standard operating procedures (SOPs) and manuals. The training curriculum included:

- Survey objectives
- Advocacy, communication and social mobilization
- Survey design and methods
- Completion of survey forms
- Data collection

- Communication skills
- Staff responsibilities
- Recruitment of participants
- Informed consent procedures
- Ethical guidelines for research including participants' rights, privacy and confidentiality
- Blood collection for children and adults, including venipuncture and finger/heel stick
- Home-based HIV testing, HBV and HCV testing and counseling
- CD4 count measurement using point-of-care (POC) Pima™ Analyzer
- Biosafety
- Referral of participants to health and social services
- Referrals for adverse events
- Safety procedures in the field
- Protocol deviations, adverse events and reporting of events
- Management and transportation of blood specimens

All laboratory staff were trained in specimen management, including specimen processing, labeling and quality assurance (QA). Central laboratory staff were trained in VL measurement, early infant diagnosis (EID), HIV confirmatory testing and HIV recency testing using the Limiting Antigen (LAg) Avidity enzyme immunoassay (EIA).

Survey Staff

Fieldwork was conducted by 1,935 field staff composed of 190 team leaders, 380 interviewers, 380 counselors, 380 drivers, 190 community trackers and 415 field laboratorians. Field teams included a team lead, a tracker, two interviewers, two counselors, two field laboratory technicians and two drivers. All teams consisted of male and female staff who spoke the languages used in the study areas to which they were deployed. The field teams were supervised by a director and field implementation was supported by five zonal technical advisors. Three of these five technical advisors oversaw two zones each. Other technical advisors included the HIV Linkage to Care Lead and the National Linkage to Care Advisor. NAIIS staff included 14 field coordinators managed by a central staff team, who guided and oversaw data collection activities, performed quality checks and provided technical support (Appendix D).

In addition, the laboratory staff were organized at different levels (two senior technical lab advisors, four technical lab advisors, 12 zonal and sub-zonal lab coordinators and 18 lab logisticians). A total of 105 satellite laboratory technicians and 10 central lab specialists processed specimens and performed additional procedures for HIV-1 VL, infant virologic HIV testing (IVT)/EID, quality control (QC) and QA.

Pilot Survey

After training all field teams, a pilot was conducted, including informed consent, data collection and management, HIV testing and counseling and laboratory activities in 191 EAs with 25 households per EA of the sampling frame, a total of 4,775 households. Participants in the pilot were informed that they were participating in a pilot. Data collected from these households were not included in the survey. Information gathered from the pilot survey was used to modify survey collection instruments and field procedures. All changes in the questionnaire after the pilot were agreed upon by the FMoH/NACA in consultation with stakeholders and approved by the appropriate institutional review boards (IRBs).

Community Sensitization and Mobilization

Prior to data collection, community sensitization and mobilization were conducted to maximize community support and participation in the survey. Advocacy, communication, sensitization and mobilization activities began four months before fieldwork commenced with a high-level national launch meeting that included key national and regional leaders, mass media and other stakeholders. Activities leveraged existing structures conducted by the state and local government-based mobilization teams in each EA prior to data collection to facilitate ownership of the survey. The mobilization teams held community sensitization meetings, dialogues and rallies; distributed printed information, education and communication materials such as posters, leaflets, flyers and brochures; and conducted house-to-house interpersonal communications with selected households and other community residents. Community mobilization data were captured using paper-based data collection tools and entered into Encuesta, an electronic data collection application.

Supervision

Field supervisors provided ongoing supervision throughout NAIIS field implementation. Field supervisors supported teams by organizing supplies ensured transport of blood specimens, coordinated community-mobilization efforts, provided technical troubleshooting and checked the quality of household procedures and data collected. During monitoring visits, daily monitoring forms were used for household and individual outcome tracking and verifying completeness of interviews. Household revisits were used to verify results. Assessment of the quality of survey procedures, including adherence to protocol and standard operating procedures (SOPs) and identification of challenges, resolutions and responses to challenges with data collection, was also observed by the monitoring teams. Regular debriefing sessions were held between field-based supervisors and monitoring teams. External monitoring teams, including GoN staff, Orphan Reach (formerly QED Clinical Services), state implementation teams and international monitors, periodically (bi-monthly and monthly) observed data collection activities in the field and laboratories to ensure quality and provide technical support, quality checks and controls. Monitoring reports were circulated to collaborating institutions and the NAIIS Technical Committee. As necessary, survey practices were amended to respond to problems identified during monitoring.

Electronic Monitoring System

The Activity Information Management System (AIMS) was used to monitor survey progress. Assignment and tracking of devices to staff was managed by the AIMS inventory module. The AIMS dashboard provided a daily comprehensive overview of the data uploaded into the NAIIS server, e.g., data collection coverage, EA completion status, sampled households, household and eligible household member response rates, biomarkers and overall progress towards the achievement of the target sample. Field data quality was reviewed by 30 data monitors who utilized Voice Over Internet Protocol systems to interact with the field teams and correct identified errors. The data monitors were situated at the central office.

Survey Instrument and Procedure for Data Collection

Survey instruments comprised of questionnaires and laboratory forms were built into a Computer Assisted Personal Interviewing (CAPI) system where the interviewer uses a tablet to administer and record the interview responses. NAIIS interview staff used Android tablets with Census and Survey Processing System (CSPro) software. All tablets were encrypted and password-protected to ensure confidentiality. The questionnaires were translated into the three major Nigerian languages, Hausa, Igbo and Yoruba. The questionnaire was administered in English and the three major Nigerian languages. Household, individual interview, counseling and field laboratory data were recorded using CAPI. The household questionnaire included modules on head of household eligibility; household schedule, including orphan status; and household characteristics (Appendix E). The individual adult questionnaire was administered to participants aged 15-64 years and included modules on socio-demographic characteristics; marriage; reproduction; children; male circumcision (men only); sexual activity; HIV testing; HIV status, care and treatment; tuberculosis and other health issues; and gender norms (Appendix F). Participants who self-reported their HIV-positive status were asked questions about their HIV care experiences. Parents or guardians responded to questions on their children's (aged 0-14 years) health, participation in HBTC services and, if the child was reported to have an HIV-positive status, their child's HIV care experiences as a part of the adult interview. The individual adolescent questionnaire was administered to participants aged 10-14 years and included modules on socio-demographic characteristics; parental support; alcohol and drugs; condoms; sexual behaviors; HIV knowledge; HIV risk perception; HIV testing; HIV stigma; and social norms, intention to abstain, self-efficacy and assertiveness (Appendix G).

2.5 Laboratory

A detailed description of the NAIIS laboratory methodology is available in Appendix B of this report.

All field test results were returned to participants the same day as the survey interview. All participants, whether HIV-positive or HIV-negative, received two copies of the written test results. Identified HIV-positive participants were referred to health facilities of their choice that offered HIV care and treatment services. Emancipated minors received their results directly. For children aged 10-17 years, results were received by the parents or guardians with the child present, only after receiving parental or guardian permission and child assent. Test results for children aged 0-9 years were disclosed and returned to parents or guardians.

Satellite, Mobile and Central Laboratories

A total of 94 satellite laboratories were activated to support NAIIS. Three mobile laboratories supported areas with security challenges or difficult topography. The EAs were mapped and linked to specific satellite and mobile laboratories based on proximity. The Nigeria Centre for Disease Control (NCDC) National Reference Laboratory (NRL) was designated as the central reference laboratory and biorepository for the survey. Trained lab specialists at each satellite and mobile laboratory performed HIV confirmatory tests, conducted QA tests and processed whole blood specimens into plasma aliquots and dried blood spot (DBS) cards for temporary storage at -20°C. HIV rapid test QA was conducted on the first 50 specimens tested by each field laboratory technician. All HIV-positive specimens, whether identified in the field or during QA, underwent confirmatory testing using the Geenius™ HIV 1/2 Supplemental Assay (Bio-Rad, Hercules, California, United States). A positive Geenius™ HIV 1/2 result defined an HIV positive test result for the survey. Specimens that were HIV positive from the HBTC and HIV negative on Geenius™ HIV 1/2 were retested using Western blot and Total Nucleic Acid (TNA) PCR. Central laboratory procedures included HIV VL testing, HIV TNA PCR for infant virologic testing and for confirmation of status of those who self-reported an HIV-positive status but tested HIV negative in HBTC, HIV recency testing, HIV drug resistance testing and long-term storage of specimens at -80°C.

The survey conducted household revisits for investigation of discrepancies between the results of tests in the field and in the laboratory. The specimens collected during the revisit underwent comprehensive retesting in the laboratory. For each case, an analysis of the nature of the discrepancy and potential sources of error was performed to determine the definitive HIV status for the participant and for analysis.

2.6 Data Processing and Analysis

During the household data collection, questionnaire and laboratory data were transmitted between tablets via Bluetooth connection. This facilitated synchronization of household rosters and ensured data collection for each participant followed the correct pathway. All field data collected in CSPro and the Laboratory Data Management System (LDMS) were transmitted to a central server using File Transfer Protocol Secure (FTPS) over a 4G or 3G telecommunication provider at least once a day. Questionnaire data cleaning was conducted using CSPro and SAS 9.4 (SAS Institute Inc., Cary, North Carolina, United States). Laboratory data were cleaned and merged with the final questionnaire database using unique specimen barcodes and study identification numbers.

All results presented in the technical report were based on weighted estimates unless otherwise stated. Analysis weights accounted for sample selection probabilities and adjusted for nonresponse and noncoverage. Nonresponse adjusted weights were calculated for households, individual interviews and individual blood draws in a hierarchical form. Adjustment for nonresponse for initial individual and blood-level weights was based on the development of weighting adjustment cells defined by a combination of variables that were potential predictors of response and HIV status. The nonresponse adjustment cells were constructed using the Chi-square Automatic Interaction Detector (CHAID) algorithm. The cells were defined based on data from the household interview for the adjustment of individual-level weights and from both the household and individual interviews for the adjustment of blood specimen-level weights. Post-stratification adjustments were implemented to compensate for non-coverage in the sampling process. This final adjustment calibrated the nonresponse-adjusted individual and blood weights to make the sum of each set of weights conform to national population totals by sex and five-year age groups.

Descriptive analyses of response rates, characteristics of respondents, HIV prevalence, CD4 count distribution, HIV testing, self-reported HIV status, self-reported ART, VLS, PMTCT indicators, HBV, HCV and sexual behavior were conducted using SAS 9.4.

Incidence estimates were based on the number of HIV infections identified as recent with the HIV-1 LAg Avidity plus VL algorithm and ARV algorithm and obtained using the formula recommended by the WHO Incidence Working Group and Consortium for Evaluation and Performance of Incidence Assays and with assay performance characteristics of a mean duration of recent infection (MDRI) = 130 days (95% CI: 118, 142), a time cutoff (T) = 1.0 year and percentage false recent (PFR) = 0.00.

2.7 Ethical Considerations

All survey procedures were aligned with recommendations from the ethics and regulatory board. Human subject review was conducted by the CDC IRB, the UMB IRB and the Nigerian National Health Research Ethics Committee.

Informed Consent

The informed consent/assent read to potential participants contained all information required to make an informed decision as to whether to participate, including all elements of informed consent as required by United States 45 Code of Federal Regulations (CFR) 46.116 and 21 CFR 50.25(a)(b). Consent forms (Appendix H) were used for household interviews of adults aged 18-64 years and individual interviews and blood draw for individuals aged 18-64 years. Parental/guardian permission forms were used for interviews and blood draw of minors aged 10-17 years prior to individual assent. Assent forms were used for interviews and biomarkers for minors aged 10-17 years. Parental/guardian permission forms were used for blood draw for minors aged 0-9 years.

3. RESPONSE RATE

3.1 Background

Household response rates were calculated using the American Association for Public Opinion Research Response Rate 4 method¹ as the number of complete and incomplete household interviews among all eligible households, and those estimated to be eligible among those with unknown eligibility (households not located, not attempted or unreachable). Vacant and destroyed households, nonresidential units and household units with no eligible respondents were considered not eligible and excluded from the calculation.

Individual interview response rates were calculated as the number of individuals interviewed divided by the number of individuals eligible to participate in the survey. Blood draw response rates for adults were calculated as the number of adults who provided a blood specimen divided by the number of adults who were interviewed. Blood draw response rates for children were calculated as the number of children who provided a blood specimen divided by the number of children eligible to participate in the survey.

3.2 Results

Tables 3.A and 3.B describe the household, individual interview and blood draw response rates.

3.2.1 Key Findings

- A total of 101,267 households were selected, 89,345 were occupied and 83,909 completed the household interview (Table 3.A).
- For adults aged 15-64 years, interview response rate was 91.6% for women and 88.2% for men; blood draw response rate was 92.9% for women and 93.6% for men (Table 3.B).
- For adolescents aged 10-14 years, interview response rate was 86.8% for women and 86.2% for men; blood draw response rate was 91.2% for women and 92.3% for men (Table 3.B).
- For children aged 0-9 years, blood draw response rate was 68.5% for women and men (Table 3.B).

3.3 References

1. American Association for Public Opinion Research (AAPOR). Standard Definitions: Final Dispositions of Case Codes and Outcome Rates for Surveys. 9th edition. http://www.aapor.org/AAPOR_Main/media/publications/Standard-Definitions20169theditionfinal.pdf. Accessed March 10, 2019.

Table 3.A Household response rates

Place of residence by number of households selected, occupied and interviewed and household response rates (unweighted), NAIIS 2018

Result	Place of residence		
	Urban	Rural	Total
Household interviews			
Households selected	43,932	57,335	101,267
Households occupied	39,288	50,057	89,345
Households interviewed	36,314	47,595	83,909
Household response rate¹ (unweighted)	90.1	88.3	89.1

¹Household response rate was calculated using the American Association for Public Opinion Research (AAPOR) Response Rate 4 (RR4) method:

http://www.aapor.org/AAPOR_Main/media/publications/Standard-Definitions20169theditionfinal.pdf

Table 3.B Interview and blood draw response rates						
Place of residence and sex by number of eligible individuals and response rates for individual interviews ¹ and blood draws ² (unweighted), NAIIS 2018						
Result	Place of residence					
	Urban		Rural		Total	
	Males	Females	Males	Females	Males	Females
Eligible individuals, aged 0-9 years						
Number of eligible individuals	6,748	6,584	10,183	9,622	16,931	16,206
Blood draw response rate ²	68.7	67.6	68.4	69.2	68.5	68.5
Eligible individuals, aged 10-14 years						
Number of eligible individuals	2,775	2,724	3,469	3,357	6,244	6,081
Interview response rate ¹	86.3	87.7	86.2	86.1	86.2	86.8
Blood draw response rate ²	92.5	91.0	92.2	91.4	92.3	91.2
Eligible individuals, aged 15-24 years						
Number of eligible individuals	12,923	15,037	16,990	20,479	29,913	35,516
Interview response rate ¹	84.3	89.4	85.6	89.7	85.0	89.6
Blood draw response rate ²	93.2	92.9	93.3	93.3	93.2	93.1
Eligible individuals, aged 15-49 years						
Number of eligible individuals	34,223	41,520	44,838	55,486	79,061	97,006
Interview response rate ¹	84.8	91.2	89.5	91.4	87.5	91.3
Blood draw response rate ²	92.9	92.7	93.9	93.3	93.5	93.0
Eligible individuals, aged 15-64 years						
Number of eligible individuals	40,559	48,116	53,882	64,439	94,441	112,555
Interview response rate ¹	85.4	91.3	90.4	91.7	88.2	91.6
Blood draw response rate ²	92.9	92.4	94.0	93.3	93.6	92.9

¹Interview response rate – number of individuals interviewed/number of eligible individuals.

²Blood draw response rate – number of individuals who provided blood/number of individuals interviewed.

4. SURVEY HOUSEHOLD CHARACTERISTICS

4.1 Background

Household compositions are described in terms of sex of the head of household and size of the household. The age structure of the *de facto* household population (i.e., persons who slept in the household the night before) is described by sex as well as urban/rural residence.

4.2 Household Composition

NAIIS documented 83,909 heads of households for all states (Table 4.A). Approximately 57% of the surveyed households resided in rural areas.

4.3 Results

The NAIIS households' characteristics and distributions are detailed in Tables 4.A to 4.F and Figures 4.A to 4.E.

4.3.1 Key Findings

- Among the *de facto* household population, 47.9% were men and 52.1% were women (Table 4.B).
- Nationally, 29.4% of heads of household were women and 70.6% were men. Among heads of households, 3.4% of female heads of households were HIV-positive compared to 1.3% of male heads of household (Table 4.A, Table 4.F).
- Among all households, 3.1% had at least one HIV-positive member. Of households with at least one HIV-positive member, 87.9% had one HIV-positive member and 11.2% had two HIV-positive members (Table 4.D, Table 4.E).

Table 4.A Household composition by state, place of residence and sex of head of household

Percent distribution of household heads by state, place of residence and sex, NAIIS 2018

State	Place of residence						Total		
	Urban			Rural			Male Percent	Female Percent	Total Number
	Male Percent	Female Percent	Total Number	Male Percent	Female Percent	Total Number			
Abia	59.1	40.9	829	60.5	39.5	1,760	60.0	40.0	2,589
Adamawa	78.3	21.7	641	84.8	15.2	1,489	83.1	16.9	2,130
Akwa Ibom	67.7	32.3	316	60.1	39.9	2,232	61.3	38.7	2,548
Anambra	60.0	40.0	1,941	54.7	45.3	399	59.2	40.8	2,340
Bauchi	91.5	8.5	287	96.2	3.8	1,937	95.6	4.4	2,224
Bayelsa	54.9	45.1	586	56.8	43.2	1,777	56.4	43.6	2,363
Benue	64.8	35.2	329	67.5	32.5	1,916	67.2	32.8	2,245
Borno	72.0	28.0	564	80.5	19.5	281	74.7	25.3	845
Cross River	62.6	37.4	493	67.3	32.7	1,905	66.5	33.5	2,398
Delta	50.9	49.1	1,018	50.8	49.2	1,483	50.8	49.2	2,501
Ebonyi	58.3	41.7	478	56.8	43.2	2,133	57.1	42.9	2,611
Edo	53.0	47.0	1,417	64.3	35.7	1,151	57.4	42.6	2,568
Ekiti	56.6	43.4	1,886	63.1	36.9	598	58.0	42.0	2,484
Enugu	64.0	36.0	721	54.4	45.6	1,724	57.0	43.0	2,445
FCT ¹	65.6	34.4	2,112	83.6	16.4	184	67.2	32.8	2,296
Gombe	91.3	8.7	649	92.1	7.9	1,606	91.9	8.1	2,255
Imo	59.4	40.6	740	63.5	36.5	1,796	62.3	37.7	2,536
Jigawa	90.0	10.0	1,142	95.6	4.4	1,091	92.6	7.4	2,233
Kaduna	82.1	17.9	1,173	87.7	12.3	842	84.4	15.6	2,015
Kano	86.6	13.4	1,219	95.9	4.1	686	89.9	10.1	1,905
Katsina	82.3	17.7	304	90.1	9.9	1,629	88.7	11.3	1,933
Kebbi	84.3	15.7	362	89.6	10.4	1,584	88.7	11.3	1,946
Kogi	56.6	43.4	1,310	64.3	35.7	947	59.9	40.1	2,257
Kwara	60.3	39.7	1,155	76.3	23.7	1,010	67.5	32.5	2,165
Lagos	58.4	41.6	3,369	64.4	35.6	449	58.7	41.3	3,818
Nasarawa	78.8	21.2	659	82.0	18.0	1,447	80.9	19.1	2,106
Niger	75.0	25.0	472	87.7	12.3	1,809	85.5	14.5	2,281
Ogun	53.9	46.1	1,465	61.6	38.4	878	56.6	43.4	2,343
Ondo	55.1	44.9	1,207	61.7	38.3	1,339	58.8	41.2	2,546
Osun	51.1	48.9	2,233	63.8	36.2	337	52.9	47.1	2,570
Oyo	53.9	46.1	1,891	71.9	28.1	825	58.9	41.1	2,716
Plateau	62.4	37.6	781	74.8	25.2	1,534	70.8	29.2	2,315
Rivers	66.9	33.1	775	66.1	33.9	1,449	66.4	33.6	2,224

Table 4.A Household composition by state, place of residence and sex of head of household (continued)

Percent distribution of household heads by state, place of residence and sex, NAIIS 2018

State	Place of residence								
	Urban			Rural			Total		
	Male Percent	Female Percent	Total Number	Male Percent	Female Percent	Total Number	Male Percent	Female Percent	Total Number
Sokoto	85.3	14.7	594	86.1	13.9	1,320	85.8	14.2	1,914
Taraba	78.3	21.7	397	84.0	16.0	1,959	83.0	17.0	2,356
Yobe	87.4	12.6	368	92.2	7.8	1,393	91.0	9.0	1,761
Zamfara	83.9	16.1	431	85.8	14.2	696	85.0	15.0	1,127
Total	65.7	34.3	36,314	75.1	24.9	47,595	70.6	29.4	83,909

¹FCT – Federal Capital Territory.

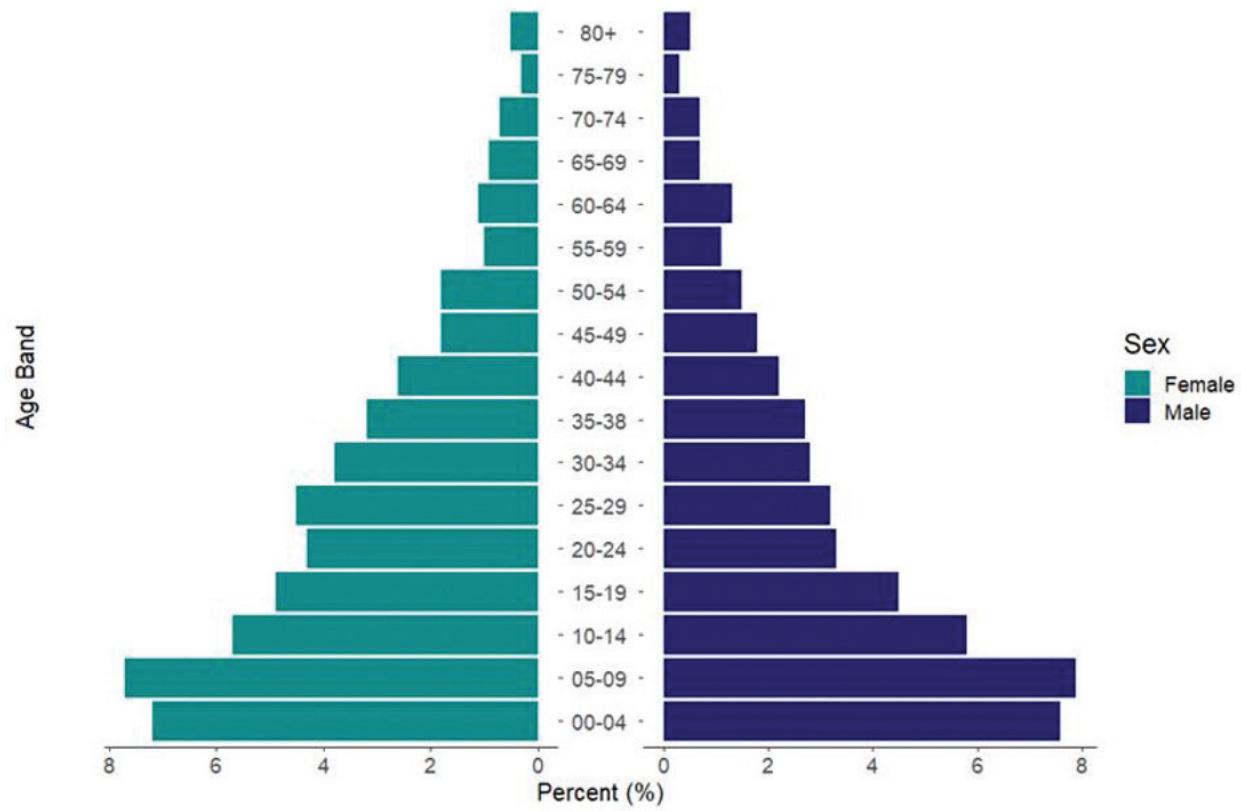


Figure 4.A Distribution of the *de facto* population by sex and age, NAIIS 2018

Table 4.B Distribution of <i>de facto</i> household population by sex and age						
Percent distribution of <i>de facto</i> household population by sex and five-year age group, NAIIS 2018						
Age (years)	Males		Females		Total	
	Percent	Number	Percent	Number	Percent	Number
0-4	7.6	28,284	7.2	27,122	14.8	55,406
5-9	7.9	29,850	7.6	28,473	15.5	58,323
10-14	5.8	22,235	5.7	21,353	11.5	43,588
15-19	4.5	17,146	4.9	18,898	9.4	36,044
20-24	3.3	12,768	4.3	16,619	7.6	29,387
25-29	3.2	12,669	4.5	17,410	7.7	30,079
30-34	2.8	10,870	3.8	14,397	6.6	25,267
35-39	2.7	10,337	3.2	12,389	5.9	22,726
40-44	2.2	8,389	2.6	10,022	4.8	18,411
45-49	1.8	6,883	1.8	7,272	3.6	14,155
50-54	1.5	6,002	1.8	6,892	3.3	12,894
55-59	1.1	4,356	1.0	3,988	2.1	8,344
60-64	1.3	5,024	1.1	4,670	2.4	9,694
65-69	0.7	2,690	0.9	3,863	1.6	6,553
70-74	0.7	2,695	0.7	2,851	1.4	5,546
75-79	0.3	1,393	0.3	1,311	0.7	2,704
≥80	0.5	2,131	0.5	2,322	1.1	4,453
Total	47.9	183,722	52.1	199,852	100.0	383,574

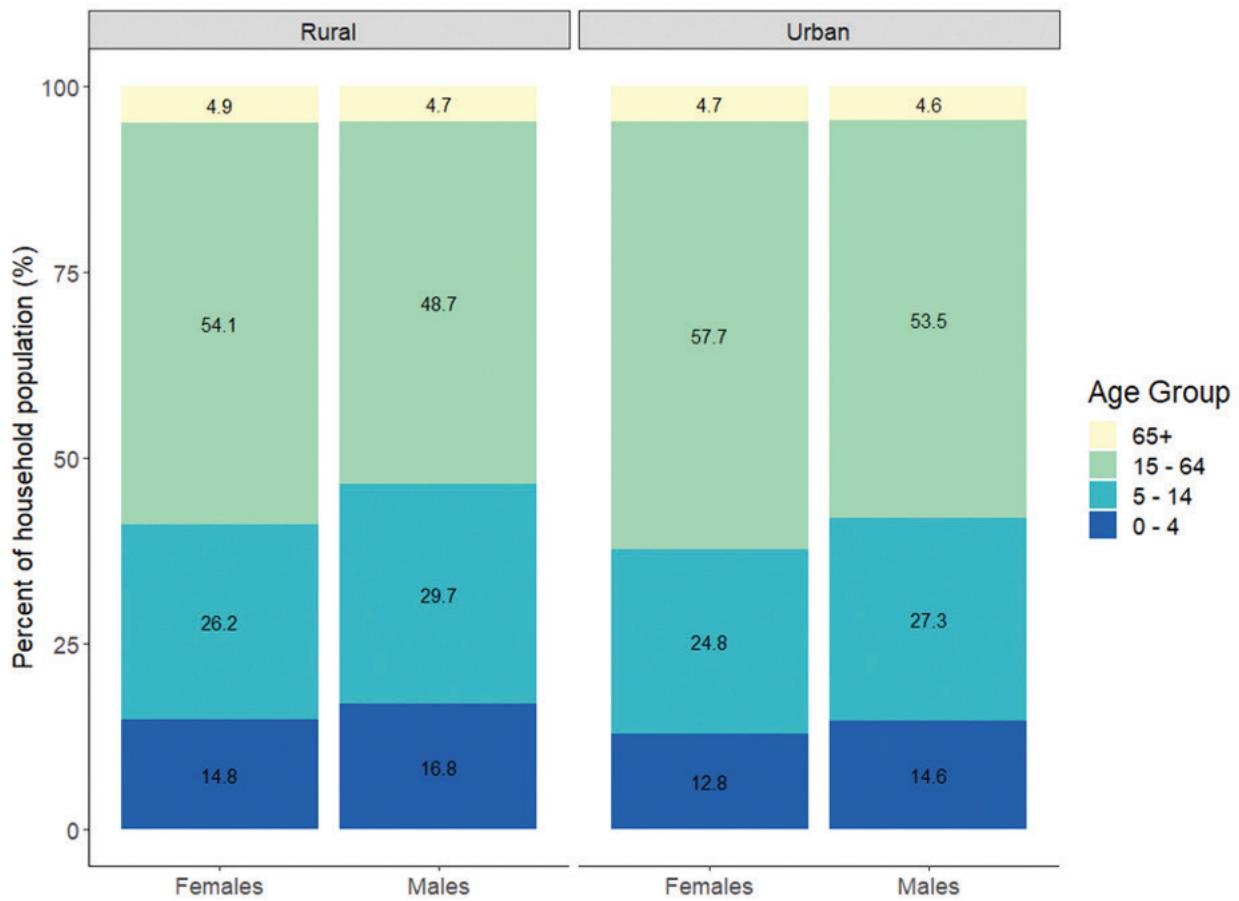


Figure 4.B Household population by age, sex and residence, NAIIS 2018

Table 4.C Distribution of <i>de facto</i> household population by sex, age and place of residence												
Percent distribution of the <i>de facto</i> household population by sex, age and place of residence, NAIIS 2018												
Age (years)	Urban						Rural					
	Males	Females		Total		Number	Males	Females		Total		Number
Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
0-4	14.6	10,516	12.8	10,299	13.7	20,815	16.8	17,768	14.8	16,823	15.8	34,591
5-14	27.3	19,998	24.8	19,769	26.0	39,767	29.7	32,087	26.2	30,057	27.9	62,144
15-64	53.5	40,559	57.7	48,117	55.7	88,676	48.7	53,885	54.1	64,440	51.5	118,325
≥65	4.6	3,601	4.7	4,316	4.7	7,917	4.7	5,308	4.9	6,031	4.8	11,339
Total	100.0	74,674	100.0	82,501	100.0	157,175	100.0	109,048	100.0	117,351	100.00	226,399

Table 4.D Prevalence of HIV-affected households

Percentage of households with at least one *de facto* household member who tested HIV positive by state and place of residence, NAIIS 2018

Socio-demographic characteristics	Urban			Rural			Total					
	Percent	LCL ¹	UCL ²	Number	Percent	LCL ¹	UCL ²	Number	Percent	LCL ¹	UCL ²	Number
State												
Abia	4.9	3.3	6.6	766	5.2	4.1	6.3	1,550	5.1	4.2	6.1	2,316
Adamawa	4.9	3.2	6.6	599	1.9	1.0	2.9	1,402	2.7	1.8	3.6	2,001
Akwa Ibom	7.8	5.5	10.1	293	9.8	8.2	11.3	1,915	9.4	8.0	10.8	2,208
Anambra	5.0	3.5	6.6	1,674	5.8	3.0	8.7	331	5.1	3.7	6.5	2,005
Bauchi	1.9	0.0	3.8	275	1.2	0.6	1.8	1,864	1.3	0.8	1.9	2,139
Bayelsa	3.7	2.0	5.4	533	3.1	2.3	4.0	1,545	3.3	2.5	4.1	2,078
Benue	9.7	5.0	14.3	316	9.4	7.4	11.4	1,771	9.4	7.7	11.3	2,087
Borno	2.3	0.9	3.8	509	2.0	0.0	4.2	261	2.2	1.1	3.4	770
Cross River	3.2	1.2	5.2	452	3.9	2.9	5.0	1,702	3.8	2.9	4.8	2,154
Delta	3.6	2.5	4.8	875	3.2	1.9	4.4	1,220	3.4	2.5	4.3	2,095
Ebonyi	2.3	0.9	3.7	442	2.0	1.3	2.7	1,959	2.0	1.4	2.7	2,401
Edo	3.2	2.2	4.1	1,229	3.4	2.1	4.6	983	3.2	2.6	4.0	2,212
Ekiti	1.3	0.7	1.9	1,500	1.1	0.1	2.1	480	1.3	0.8	1.8	1,980
Enugu	2.4	1.2	3.6	655	4.5	3.3	5.7	1,448	3.9	3.0	4.9	2,103
FCT ³	3.3	2.3	4.2	1,904	4.2	0.6	7.7	177	3.3	2.4	4.3	2,081
Gombe	5.4	3.4	7.5	630	2.4	1.0	3.8	1,545	3.2	2.0	4.5	2,175
Imo	3.0	1.4	4.6	661	4.8	3.3	6.3	1,533	4.2	3.1	5.4	2,194
Jigawa	1.0	0.4	1.5	1,083	0.6	0.0	1.2	1,040	0.8	0.4	1.2	2,123
Kaduna	3.2	1.7	4.7	1,117	1.7	0.4	2.9	805	2.6	1.6	3.6	1,922
Kano	1.5	0.5	2.6	1,064	1.0	0.2	1.7	634	1.3	0.6	2.1	1,698
Katsina	1.1	0.0	2.6	280	0.5	0.1	1.0	1,496	0.6	0.2	1.1	1,776
Kebbi	3.2	1.1	5.2	339	0.8	0.4	1.3	1,471	1.3	0.7	1.9	1,810
Kogi	1.9	0.9	2.9	1,133	2.1	0.9	3.2	831	2.0	1.3	2.7	1,964
Kwara	2.1	1.1	3.1	973	1.7	0.8	2.5	845	1.9	1.2	2.6	1,818
Lagos	2.6	2.0	3.2	3,046	5.0	2.7	7.3	384	2.8	2.3	3.3	3,430
Nasarawa	4.0	2.4	5.5	623	4.8	3.4	6.2	1,359	4.6	3.6	5.6	1,982
Niger	3.3	0.9	5.7	448	1.6	1.0	2.3	1,679	1.9	1.2	2.6	2,127
Ogun	3.1	2.1	4.1	1,235	2.4	0.9	3.9	688	2.9	2.0	3.7	1,923
Ondo	1.7	0.7	2.8	1,016	2.1	1.2	3.0	1,138	1.9	1.2	2.6	2,154
Osun	1.7	1.1	2.4	1,713	1.4	0.0	2.9	250	1.7	1.1	2.3	1,963
Oyo	1.9	1.2	2.6	1,575	1.1	0.3	1.9	643	1.7	1.1	2.3	2,218
Plateau	5.1	3.5	6.8	746	2.7	2.0	3.5	1,458	3.5	2.7	4.3	2,204

Table 4.D Prevalence of HIV-affected households (continued)

Percentage of households with at least one *de facto* household member who tested HIV positive by state and place of residence, NAIIS 2018

Socio-demographic characteristics	Urban			Rural			Total					
	Percent	LCL ¹	UCL ²	Number	Percent	LCL ¹	UCL ²	Number	Percent	LCL ¹	UCL ²	Number
State												
Rivers	5.4	3.4	7.5	696	7.9	6.2	9.6	1,279	7.0	5.7	8.4	1,975
Sokoto	0.7	0.0	1.5	528	0.9	0.3	1.5	1,217	0.8	0.3	1.3	1,745
Taraba	8.0	4.2	11.8	384	7.0	5.2	8.7	1,881	7.1	5.6	8.7	2,265
Yobe	1.4	0.0	2.9	331	0.7	0.2	1.2	1,321	0.8	0.3	1.4	1,652
Zamfara	0.2	0.0	0.6	389	1.0	0.3	1.8	641	0.7	0.2	1.2	1,030
Wealth quintile												
Lowest	1.2	0.6	1.7	1,528	1.8	1.5	2.1	12,272	1.7	1.5	2.0	13,800
Second	2.0	1.4	2.6	2,677	2.8	2.4	3.2	11,466	2.6	2.3	3.0	14,143
Middle	2.9	2.4	3.5	5,620	4.4	3.9	4.9	10,337	3.8	3.5	4.2	15,957
Fourth	3.0	2.6	3.5	9,936	5.0	4.3	5.6	6,261	3.7	3.4	4.1	16,197
Highest	3.0	2.6	3.4	12,271	4.8	3.8	5.9	2,410	3.3	2.9	3.6	14,681
Total	2.8	2.6	3.1	32,032	3.3	3.1	3.6	42,746	3.1	2.9	3.2	74,778

¹LCL – lower confidence limit.

²UCL – upper confidence limit.

³FCT – Federal Capital Territory.

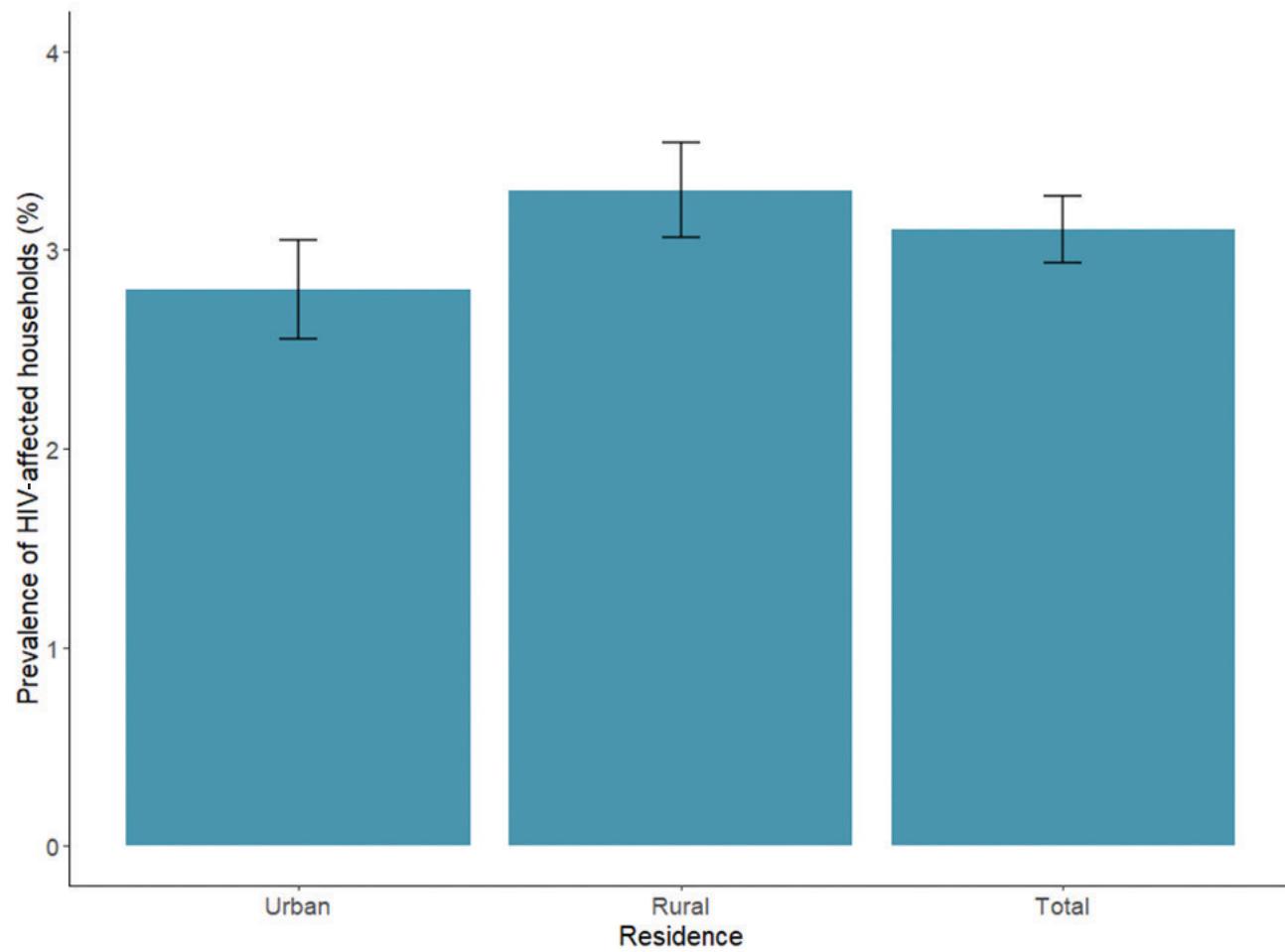


Figure 4.C Prevalence of HIV-affected households by place of residence, NAIIS 2018

Table 4.E HIV-affected households by number of HIV-positive members						
Number of HIV-positive household members	Place of residence					
	Urban		Rural		Total	
	Percent	Number	Percent	Number	Percent	Number
1	88.5	855	87.4	1,276	87.9	2,131
2	10.8	104	11.4	170	11.2	274
3	*	5	*	15	*	20
≥4	*	0	*	0	*	0
Total	100.0	964	100.0	1,461	100.0	2,425

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 4.F Prevalence of households with an HIV-positive head of household				
Socio-demographic characteristics	Percent	LCL ¹		Number
		LCL ¹	UCL ²	
Sex of head of household				
Male	1.3	1.2	1.5	43,827
Female	3.4	3.1	3.8	18,398
Place of residence				
Urban	1.9	1.7	2.1	26,394
Rural	2.0	1.8	2.2	35,831
Total	1.9	1.8	2.1	62,225

¹LCL – lower confidence interval.
²UCL – upper confidence interval.

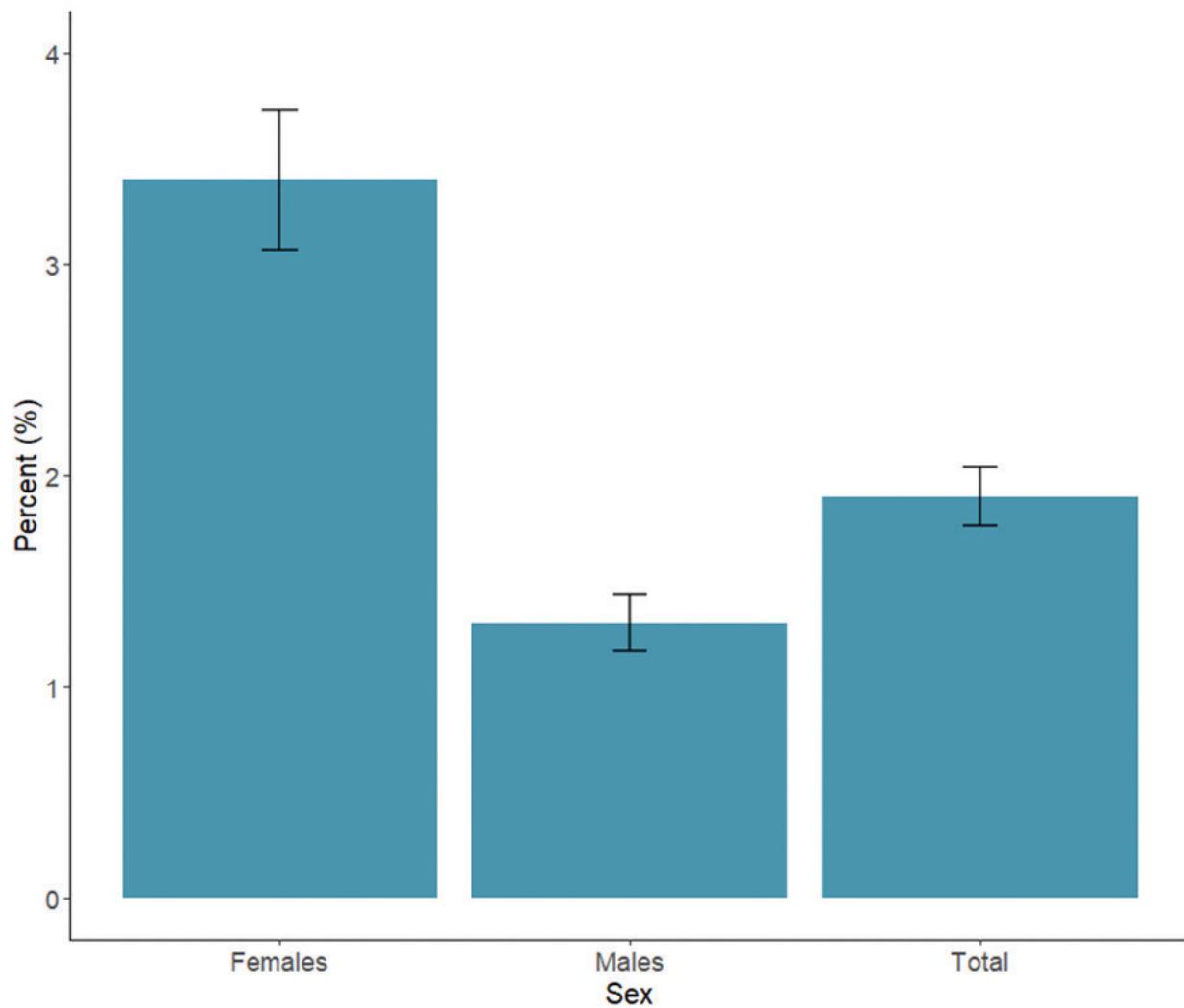


Figure 4.E Prevalence of households with an HIV-positive head of household by sex, NAIIS 2018

5. SURVEY RESPONDENT CHARACTERISTICS

5.1 Background

This chapter summarizes the basic demographic and socioeconomic characteristics of survey respondents (children (aged ≤ 14 years), adolescents (aged 10-14 years) and adults (aged 15-64 years). The key indicators in this report are stratified according to these characteristics.

5.2 Demographic Characteristics of the Adult Population

The distribution of the adult population showed a variation between rural (51.8%) and urban (48.2%) dwellers but no variation by sex (Table 5.A).

5.3 Results

Tables 5.A to 5.C present the demographic characteristics of NAIIS respondents.

5.3.1 Key Findings

- Among adult respondents, 87.3% were aged 15-49 years (Table 5.A).
- Among children, 35.5% were aged 5-9 years (Table 5.B).
- Among adult respondents, 57.5% were either married or living together with a higher proportion among women (64.1%) than men (51.2%) (Table 5.A).
- Among adult respondents, 41.8% attained secondary education while 18.0% had no education (Table 5.A).

Table 5.A Demographic characteristics of the adult population						
Percent distribution of <i>de facto</i> population aged 15-64 years by sex and other selected socio-demographic characteristics, NAIIS 2018						
Socio-demographic characteristics	Males		Females		Total	
	Percent	Number	Percent	Number	Percent	Number
Place of residence						
Urban	48.1	34,635	48.2	43,953	48.2	78,588
Rural	51.9	48,705	51.8	59,112	51.8	107,817
Marital status						
Never married	46.8	34,157	25.9	24,339	36.6	58,496
Married or living together	51.2	47,079	64.1	67,382	57.5	114,461
Divorced or separated	1.5	1,346	3.1	3,289	2.3	4,635
Widowed	0.6	619	6.9	7,939	3.7	8,558
Type of union						
In polygynous union	9.3	8,611	22.7	23,041	15.9	31,652
Not in polygynous union	41.6	38,139	41.2	43,889	41.5	82,028
Not currently in union	49.0	36,122	36.1	35,567	42.7	71,689
Education¹						
No education	10.6	9,878	25.7	27,876	18.0	37,754
Primary	16.0	14,588	18.4	20,078	17.2	34,666
Secondary	46.1	36,387	37.3	37,606	41.8	73,993
Tertiary	18.8	15,976	11.2	11,825	15.1	27,801
Others	8.4	6,443	7.4	5,561	7.9	12,004
Wealth quintile						
Lowest	17.9	15,831	17.6	18,465	17.8	34,296
Second	18.7	16,154	18.9	19,956	18.8	36,110
Middle	19.7	17,529	20.1	22,201	19.9	39,730
Fourth	21.1	17,573	21.4	22,311	21.3	39,884
Highest	22.6	16,253	22.0	20,132	22.3	36,385
Age (years)						
15-19	19.8	14,323	19.5	16,669	19.7	30,992
20-24	16.4	11,111	16.2	15,141	16.3	26,252
25-29	13.9	11,322	13.8	16,022	13.8	27,344
30-34	12.1	9,680	12.0	13,295	12.0	22,975
35-39	10.4	9,187	10.4	11,477	10.4	20,664
40-44	8.5	7,380	8.5	9,275	8.5	16,655
45-49	6.6	6,166	6.6	6,714	6.6	12,880
50-54	5.2	5,432	5.4	6,418	5.3	11,850
55-59	4.0	4,011	4.3	3,673	4.2	7,684
60-64	3.0	4,728	3.4	4,381	3.2	9,109

Table 5.A Demographic characteristics of the adult population (continued)						
Percent distribution of <i>de facto</i> population aged 15-64 years by sex and other selected socio-demographic characteristics, NAIIS 2018						
Socio-demographic characteristics	Males		Females		Total	
	Percent	Number	Percent	Number	Percent	Number
Total 15-24 years	36.2	25,434	35.8	31,810	36.0	57,244
Total 15-49 years	87.7	69,169	86.9	88,593	87.3	157,762
Total 15-64 years	100.0	83,340	100.0	103,065	100.0	186,405

¹Education categories refer to the highest level of education attended, whether that level was completed.

Table 5.B Demographic characteristics of the paediatric population (0-14 years old)						
Percent distribution of <i>de facto</i> population aged 0-14 years by sex and other selected socio-demographic characteristics, NAIIS 2018						
Socio-demographic characteristics	Males		Females		Total	
	Percent	Number	Percent	Number	Percent	Number
Age						
0-17 months	8.5	2,131	8.1	2,021	8.3	4,152
18-59 months	24.0	6,089	23.3	5,748	23.6	11,837
5-9 years	35.0	8,628	36.0	8,366	35.5	16,994
10-14 years	32.6	5,385	32.6	5,280	32.6	10,665
Place of residence						
Urban	48.1	9,104	49.2	8,943	48.6	18,047
Rural	51.9	13,129	50.8	12,472	51.4	25,601
Geopolitical zone						
North West	40.9	6,588	42.0	6,495	41.4	13,083
North East	14.6	3,761	13.5	3,470	14.1	7,231
North Central	9.2	3,196	9.0	3,039	9.1	6,235
South East	7.7	2,591	7.9	2,496	7.8	5,087
South South	10.1	2,706	10.3	2,718	10.2	5,424
South West	17.5	3,391	17.3	3,197	17.4	6,588
Total 0-4 years	32.4	8,220	31.4	7,769	31.9	15,989
Total 0-14 years	100.0	22,233	100.0	21,415	100.0	43,648

Table 5.C Demographic characteristics of the young adolescent population						
Socio-demographic characteristics	Males		Females		Total	
	Percent	Number	Percent	Number	Percent	Number
Place of residence						
Urban	46.1	2,394	47.4	2,388	46.8	4,782
Rural	53.9	2,991	52.6	2,892	53.2	5,883
Geopolitical zone						
North West	28.7	1,455	30.5	1,506	29.6	2,961
North East	15.8	850	15.2	832	15.5	1,682
North Central	13.4	786	12.6	741	13.0	1,527
South East	11.0	675	11.0	630	11.0	1,305
South South	12.3	735	12.8	742	12.5	1,477
South West	18.7	884	18.0	829	18.4	1,713
Total 10-14 years	100.0	5,385	100.0	5,280	100.0	10,665

6. HIV INCIDENCE

6.1 Background

HIV incidence, the measure of new HIV infections in a population over time, provides important information on the status of the HIV epidemic. HIV incidence can be used for effective targeted HIV prevention planning in groups that are most vulnerable to recent HIV infection and to measure the impact of HIV prevention interventions. For the purposes of this analysis, HIV incidence among adults aged 15-64 years is expressed as the cumulative incidence or risk of new infections in a 12-month period, a close approximation to the instantaneous incidence rate (Appendix B). NAIIS was not powered to estimate incidence at the sub-national level or across sub-groups.

6.2 Results

Tables 6.A and 6.B present HIV incidence in Nigeria at the time of the survey.

6.2.1 Key Findings

- The annual incidence of HIV among adults aged 15-64 years was 0.08% (women 0.12%, men 0.05%). This corresponds to 8 new infections per 10,000 persons per year (Table 6.A).
- Annual HIV incidence peaked at 0.22% among women aged 25-34 years and at 0.10% among men in the same age group (Table 6.A).

Table 6.A Annual HIV incidence using LAg/VL¹ testing algorithm

Annual incidence of HIV among persons aged 15-64 years by sex and age using LAg/VL¹ algorithm,
NAIIS 2018

Age (years)	Males		Females		Total	
	Percentage annual incidence ²	95% CI ³	Percentage annual incidence ²	95% CI ³	Percentage annual incidence ²	95% CI ³
15-24	0.03	(0.00,0.07)	0.05	(0.01,0.10)	0.04	(0.01,0.07)
25-34	0.10	(0.01,0.19)	0.22	(0.08,0.37)	0.16	(0.07,0.25)
35-49	0.05	(0.00,0.15)	0.10	(0.02,0.18)	0.08	(0.02,0.14)
15-49	0.06	(0.02,0.10)	0.12	(0.07,0.17)	0.09	(0.05,0.12)
15-64	0.05	(0.02,0.09)	0.12	(0.07,0.17)	0.08	(0.05,0.12)

¹ LAg/VL: Limiting antigen/viral load.

² Relates to Global AIDS Monitoring indicator 3.1: HIV incidence.

³ 95% CI (confidence interval) indicates the interval within which the true population parameter is expected to fall 95% of the time.

Table 6.B Annual HIV incidence using LAg/VL/ARV¹ testing algorithm

Annual incidence of HIV among persons aged 15-64 years by sex and age using LAg/VL/ARV¹ algorithm,
NAIIS 2018

Age (years)	Males		Females		Total	
	Percentage annual incidence ²	95% CI ³	Percentage annual incidence ²	95% CI ³	Percentage annual incidence ²	95% CI ³
15-24	0.03	(0.00,0.07)	0.05	(0.01,0.10)	0.04	(0.01,0.07)
25-34	0.10	(0.01,0.19)	0.21	(0.07,0.35)	0.15	(0.07,0.24)
35-49	0.05	(0.00,0.15)	0.10	(0.02,0.18)	0.08	(0.01,0.14)
15-49	0.06	(0.02,0.10)	0.11	(0.06,0.16)	0.08	(0.05,0.12)
15-64	0.05	(0.02,0.09)	0.11	(0.06,0.16)	0.08	(0.05,0.11)

¹ LAg/VL/ARV: Limiting antigen/viral load/antiretrovirals.

² Relates to Global AIDS Monitoring indicator 3.1: HIV incidence.

³ 95% CI (confidence interval) indicates the interval within which the true population parameter is expected to fall 95% of the time.

7. HIV PREVALENCE

7.1 Background

This chapter presents representative estimates of HIV prevalence among adults aged 15-64 years at the national and state level by selected demographic and behavioral characteristics. HIV prevalence testing was conducted in each household using a serological rapid diagnostic testing algorithm based on Nigeria's National HIV Testing Guidelines, with laboratory confirmation of seropositive specimens using a supplemental assay. Appendix A describes the sample design and Appendix B describes the NAIIS HIV testing methodology. Appendix C provides estimates of sampling errors.

7.2 Results

Tables 7.A to 7.C and Figures 7.A to 7.D present HIV prevalence data from the survey.

7.2.1 Key Findings

- HIV prevalence among adults aged 15-64 years was 1.4%. This was lower among men (1.0%) than women (1.8%) and lower in urban (1.3%) areas than in rural (1.5%) areas (Table 7.A).
- HIV prevalence among adults aged 15-49 years was 1.3%. This was lower among men (0.8%) than women (1.7%) and lower in urban (1.1%) than in rural (1.4%) areas (Table 7.B).
- Among adults aged 15-49 years, Akwa Ibom State had the highest HIV prevalence (4.8%) followed by Benue State (4.3%) and Rivers State (3.6%) (Table 7.B).
- Among adults aged 15-49 years, Jigawa and Katsina States had the lowest prevalence at 0.3% each (Table 7.B).

Table 7.A HIV prevalence by demographic characteristics, persons aged 15-64 years												
HIV prevalence among persons aged 15-64 years by sex and selected socio-demographic characteristics, NAIIS 2018												
Socio-demographic characteristics	Males				Females				Total			
	Per-cent-age HIV positive	LCL ¹	UCL ²	Number	Per-cent-age HIV positive	LCL ¹	UCL ²	Number	Per-cent-age HIV positive	LCL ¹	UCL ²	Number
Place of residence												
Urban	0.9	0.8	1.0	32,172	1.6	1.5	1.8	40,618	1.3	1.1	1.4	72,790
Rural	1.0	0.9	1.2	45,798	1.9	1.8	2.1	55,128	1.5	1.4	1.6	100,926
State												
Abia	1.7	1.2	2.3	2,306	2.2	1.7	2.7	3,461	2.0	1.6	2.4	5,767
Adamawa	0.8	0.5	1.1	2,601	1.4	0.8	2.0	2,685	1.1	0.7	1.4	5,286
Akwa Ibom	2.9	2.1	3.7	1,939	6.7	5.5	7.8	2,442	4.8	4.0	5.5	4,381
Anambra	1.8	1.1	2.4	1,922	2.6	1.8	3.4	2,731	2.2	1.6	2.8	4,653
Bauchi	0.4	0.1	0.7	2,921	0.6	0.2	1.0	3,203	0.5	0.2	0.8	6,124
Bayelsa	1.4	0.9	2.0	1,722	2.1	1.5	2.7	2,170	1.7	1.3	2.2	3,892
Benue	3.5	2.6	4.3	2,156	6.3	5.0	7.6	2,410	4.8	3.9	5.7	4,566
Borno	1.0	0.2	1.8	795	1.2	0.5	1.9	1,020	1.1	0.5	1.7	1,815
Cross River	1.6	1.1	2.0	2,116	2.1	1.4	2.7	2,501	1.8	1.3	2.3	4,617
Delta	1.2	0.6	1.8	1,580	2.2	1.5	2.9	2,349	1.7	1.3	2.2	3,929
Ebonyi	0.7	0.4	1.0	2,400	0.9	0.6	1.2	4,013	0.8	0.6	1.0	6,413
Edo	1.2	0.7	1.6	1,891	2.3	1.7	3.0	2,427	1.8	1.4	2.2	4,318
Ekiti	0.3	0.1	0.6	1,606	1.1	0.6	1.6	2,007	0.7	0.4	1.0	3,613
Enugu	1.3	0.7	1.8	1,806	2.2	1.6	2.8	2,950	1.8	1.3	2.2	4,756
FCT ³	0.8	0.4	1.1	2,271	2.2	1.5	2.9	2,360	1.4	1.0	1.8	4,631
Gombe	0.8	0.4	1.2	3,283	1.6	1.0	2.3	3,256	1.2	0.7	1.6	6,539
Imo	1.3	0.7	1.9	2,190	2.0	1.5	2.6	3,253	1.7	1.2	2.1	5,443
Jigawa	0.1	0.0	0.3	2,766	0.5	0.2	0.8	2,936	0.3	0.2	0.5	5,702
Kaduna	0.6	0.3	1.0	2,471	1.4	0.8	2.0	2,782	1.0	0.6	1.4	5,253
Kano	0.4	0.1	0.6	2,125	0.7	0.3	1.2	2,262	0.6	0.3	0.9	4,387
Katsina	0.2	0.0	0.5	1,915	0.4	0.0	0.7	2,209	0.3	0.1	0.5	4,124
Kebbi	0.4	0.1	0.7	1,975	0.8	0.4	1.3	2,268	0.6	0.3	0.9	4,243
Kogi	0.5	0.1	0.8	1,846	1.2	0.8	1.7	2,345	0.8	0.5	1.2	4,191
Kwara	0.4	0.2	0.7	1,913	1.3	0.8	1.8	2,164	0.8	0.5	1.2	4,077
Lagos	0.8	0.5	1.2	3,111	1.9	1.4	2.3	4,391	1.3	1.0	1.6	7,502
Nasarawa	1.3	0.9	1.7	2,566	2.4	1.7	3.0	2,802	1.8	1.3	2.2	5,368
Niger	0.4	0.2	0.6	2,802	1.0	0.6	1.3	3,147	0.6	0.4	0.9	5,949
Ogun	0.9	0.5	1.3	1,424	1.9	1.2	2.5	2,160	1.4	1.0	1.8	3,584
Ondo	0.8	0.3	1.2	1,777	1.3	0.7	1.8	2,317	1.0	0.6	1.4	4,094

Table 7.A HIV prevalence by demographic characteristics, persons aged 15-64 years (continued)												
HIV prevalence among persons aged 15-64 years by sex and selected socio-demographic characteristics, NAIIS 2018												
Socio-demographic characteristics	Males				Females				Total			
	Per-cent-age HIV positive	LCL ¹	UCL ²	Number	Per-cent-age HIV positive	LCL ¹	UCL ²	Number	Per-cent-age HIV positive	LCL ¹	UCL ²	
Osun	0.7	0.4	1.1	1,515	1.0	0.6	1.5	2,122	0.9	0.6	1.2	3,637
Oyo	0.8	0.4	1.3	1,822	1.0	0.5	1.4	2,296	0.9	0.6	1.2	4,118
Plateau	0.6	0.3	0.9	2,370	2.3	1.7	2.9	2,904	1.5	1.1	1.8	5,274
Rivers	2.8	1.8	3.7	1,791	4.6	3.6	5.7	2,164	3.6	2.9	4.3	3,955
Sokoto	0.4	0.1	0.7	1,956	0.4	0.1	0.7	2,080	0.4	0.2	0.6	4,036
Taraba	1.7	1.3	2.2	3,119	3.6	2.6	4.6	3,653	2.6	2.0	3.3	6,772
Yobe	0.5	0.1	0.8	2,153	0.3	0.0	0.5	2,147	0.4	0.1	0.6	4,300
Zamfara	0.3	0.0	0.7	1,048	0.5	0.2	0.9	1,359	0.4	0.1	0.7	2,407
Marital status												
Never married	0.4	0.4	0.5	31,791	1.3	1.1	1.4	22,743	0.7	0.6	0.8	54,534
Married or living together	1.3	1.2	1.4	44,216	1.4	1.3	1.6	62,473	1.4	1.3	1.5	106,689
Divorced or separated	3.3	2.1	4.5	1,264	5.6	4.7	6.5	3,053	4.8	4.1	5.6	4,317
Widowed	6.9	4.5	9.4	572	5.1	4.5	5.8	7,385	5.3	4.6	5.9	7,957
Type of union												
In polygynous union	1.0	0.8	1.3	8,262	1.2	1.0	1.4	21,569	1.2	1.0	1.3	29,831
Not in polygynous union	1.4	1.2	1.5	35,658	1.6	1.4	1.7	40,496	1.5	1.3	1.6	76,154
Not currently in union	0.6	0.5	0.7	33,627	2.4	2.2	2.6	33,181	1.3	1.2	1.4	66,808
Education⁴												
No education	0.8	0.6	1.0	9,159	1.3	1.1	1.5	25,614	1.1	1.0	1.3	34,773
Primary	1.3	1.1	1.6	13,706	2.5	2.3	2.8	18,838	2.0	1.8	2.1	32,544
Secondary	1.0	0.9	1.1	34,040	1.9	1.7	2.1	35,248	1.4	1.3	1.5	69,288
Tertiary	0.9	0.7	1.1	14,897	1.9	1.6	2.2	10,866	1.3	1.1	1.5	25,763
Others	0.4	0.2	0.7	6,121	0.6	0.3	0.9	5,086	0.5	0.3	0.7	11,207

Table 7.A HIV prevalence by demographic characteristics, persons aged 15-64 years (continued)												
HIV prevalence among persons aged 15-64 years by sex and selected socio-demographic characteristics, NAIIS 2018												
Socio-demographic characteristics	Males				Females				Total			
	Per-cent-age HIV positive	LCL ¹	UCL ²	Number	Per-cent-age HIV positive	LCL ¹	UCL ²	Number	Per-cent-age HIV positive	LCL ¹	UCL ²	Number
Wealth quintile												
Lowest	0.6	0.4	0.7	14,989	1.0	0.8	1.2	17,055	0.8	0.7	0.9	32,044
Second	0.8	0.6	1.0	15,230	1.5	1.3	1.7	18,500	1.1	1.0	1.3	33,730
Middle	1.1	0.9	1.3	16,324	2.3	2.1	2.6	20,667	1.7	1.5	1.9	36,991
Fourth	1.1	0.9	1.3	16,468	2.2	1.9	2.4	20,835	1.6	1.5	1.8	37,303
Highest	1.1	0.9	1.4	14,959	1.8	1.5	2.0	18,689	1.4	1.3	1.6	33,648
Pregnancy status												
Currently pregnant	NA	NA	NA	NA	1.1	0.9	1.4	7,039	NA	NA	NA	NA
Not currently pregnant	NA	NA	NA	NA	1.8	1.7	1.9	87,531	NA	NA	NA	NA
Total 15-64 years	1.0	0.9	1.0	77,970	1.8	1.7	1.9	95,746	1.4	1.3	1.4	173,716

¹LCL – lower confidence limit.

²UCL – upper confidence limit.

³FCT – Federal Capital Territory.

⁴Education categories refer to the highest level of education attended, whether that level was completed.

NA – not applicable.

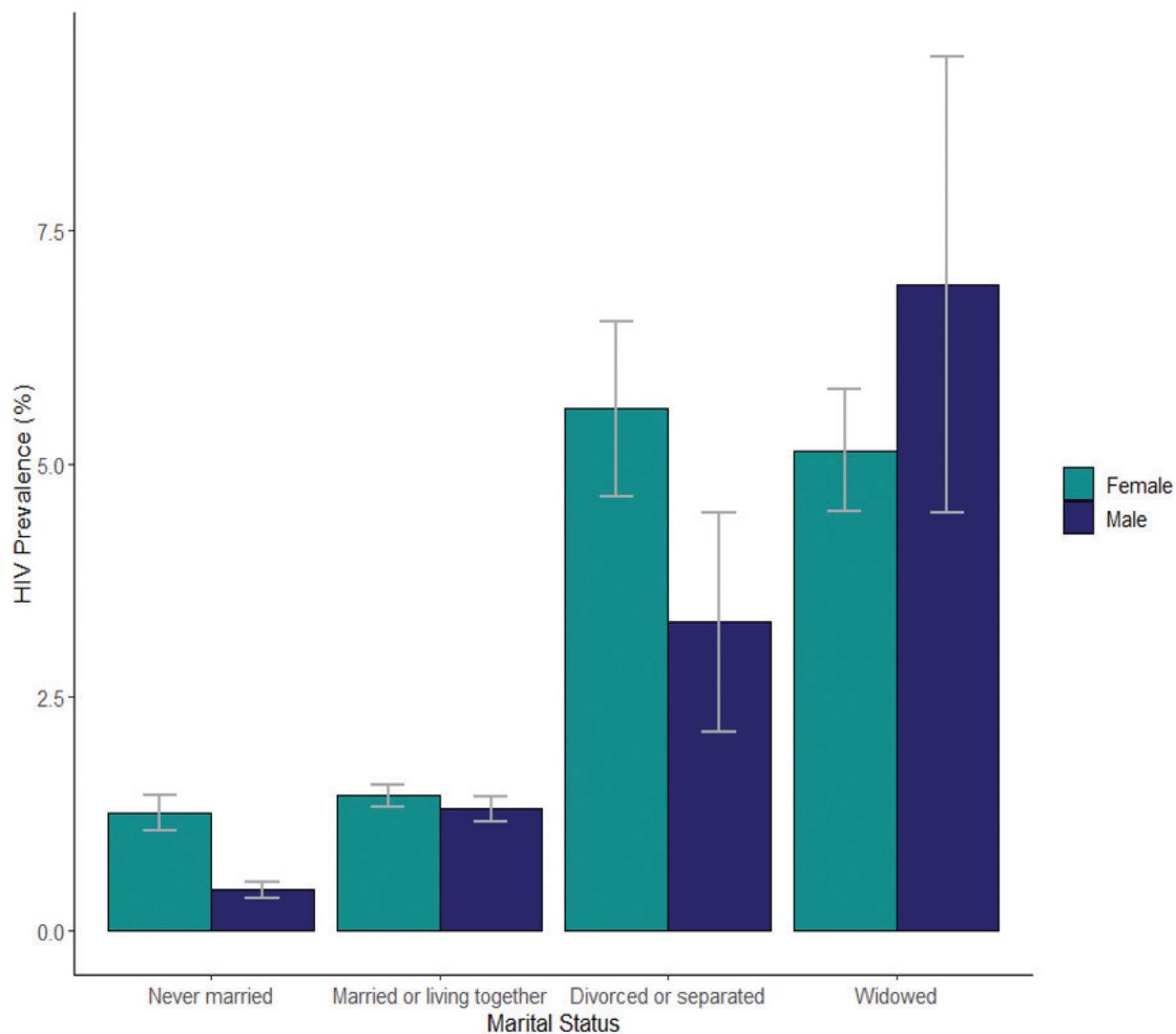


Figure 7.A HIV prevalence by marital status, persons aged 15-64 years, NAIIS 2018

Table 7.B HIV prevalence by demographic characteristics, persons aged 15-49 years

HIV prevalence among persons aged 15-49 years by sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males				Females				Total			
	Percent HIV positive	LCL ¹	UCL ²	Number	Percent HIV positive	LCL ¹	UCL ²	Number	Percent HIV positive	LCL ¹	UCL ²	Number
Place of residence												
Urban	0.7	0.6	0.9	26,969	1.6	1.4	1.8	35,072	1.1	1.0	1.3	62,041
Rural	0.9	0.8	1.1	37,698	1.9	1.7	2.0	47,347	1.4	1.3	1.5	85,045
States												
Abia	1.6	0.9	2.2	1,706	2.3	1.7	2.9	2,658	2.0	1.5	2.4	4,364
Adamawa	0.8	0.4	1.1	2,205	1.4	0.8	2.0	2,414	1.1	0.7	1.4	4,619
Akwa Ibom	2.8	1.9	3.6	1,590	6.9	5.8	8.1	2,024	4.8	4.0	5.6	3,614
Anambra	1.6	0.9	2.3	1,521	2.8	1.9	3.7	2,192	2.2	1.5	2.9	3,713
Bauchi	0.4	0.1	0.7	2,480	0.4	0.1	0.7	2,894	0.4	0.2	0.6	5,374
Bayelsa	1.3	0.8	1.9	1,514	2.0	1.3	2.6	1,907	1.6	1.2	2.1	3,421
Benue	2.7	1.9	3.5	1,790	6.2	4.9	7.4	2,073	4.3	3.5	5.2	3,863
Borno	1.1	0.3	2.0	675	1.2	0.6	1.9	901	1.2	0.5	1.9	1,576
Cross River	1.2	0.7	1.6	1,787	2.0	1.3	2.6	2,169	1.6	1.1	2.0	3,956
Delta	0.9	0.4	1.4	1,289	2.4	1.6	3.1	1,976	1.7	1.2	2.2	3,265
Ebonyi	0.5	0.2	0.9	1,823	0.9	0.6	1.2	3,260	0.7	0.5	1.0	5,083
Edo	1.0	0.5	1.4	1,512	2.2	1.5	2.8	2,014	1.6	1.1	2.0	3,526
Ekiti	0.2	0.0	0.5	1,266	1.0	0.5	1.4	1,600	0.6	0.3	0.8	2,866
Enugu	1.2	0.6	1.9	1,420	2.4	1.7	3.2	2,316	1.9	1.3	2.4	3,736
FCT ³	0.6	0.2	1.0	1,974	2.1	1.4	2.8	2,148	1.3	0.9	1.7	4,122
Gombe	0.7	0.3	1.1	2,861	1.6	1.0	2.2	2,929	1.1	0.6	1.5	5,790
Imo	1.0	0.4	1.5	1,596	1.9	1.4	2.5	2,451	1.5	1.0	2.0	4,047
Jigawa	0.1	0.0	0.3	2,284	0.5	0.2	0.8	2,674	0.3	0.1	0.5	4,958
Kaduna	0.5	0.1	0.8	2,151	1.3	0.7	2.0	2,505	0.9	0.5	1.3	4,656
Kano	0.3	0.1	0.5	1,805	0.7	0.3	1.1	2,060	0.5	0.2	0.8	3,865
Katsina	0.2	0.0	0.5	1,554	0.3	0.0	0.6	2,001	0.3	0.0	0.5	3,555
Kebbi	0.4	0.1	0.8	1,636	0.8	0.4	1.3	2,087	0.6	0.3	0.9	3,723
Kogi	0.4	0.1	0.8	1,529	1.3	0.8	1.9	1,954	0.9	0.5	1.2	3,483
Kwara	0.4	0.1	0.7	1,585	1.4	0.8	1.9	1,814	0.8	0.5	1.2	3,399
Lagos	0.7	0.3	1.1	2,635	1.7	1.3	2.2	3,787	1.2	0.9	1.5	6,422
Nasarawa	1.1	0.7	1.5	2,285	2.3	1.7	2.9	2,510	1.6	1.2	2.1	4,795
Niger	0.3	0.1	0.6	2,388	0.9	0.6	1.3	2,898	0.6	0.4	0.9	5,286
Ogun	0.5	0.1	0.8	1,145	1.6	1.0	2.2	1,790	1.1	0.7	1.4	2,935

Table 7.B HIV prevalence by demographic characteristics, persons aged 15-49 years (continued)												
HIV prevalence among persons aged 15-49 years by sex and selected socio-demographic characteristics, NAIIS 2018												
Socio-demographic characteristics	Males				Females				Total			
	Percent HIV positive	LCL ¹	UCL ²	Number	Percent HIV positive	LCL ¹	UCL ²	Number	Percent HIV positive	LCL ¹	UCL ²	Number
Ondo	0.6	0.2	1.0	1,463	1.1	0.6	1.6	1,924	0.9	0.5	1.2	3,387
Osun	0.7	0.3	1.1	1,230	1.0	0.5	1.5	1,742	0.8	0.5	1.2	2,972
Oyo	0.8	0.3	1.2	1,468	0.9	0.4	1.3	1,916	0.8	0.5	1.1	3,384
Plateau	0.4	0.2	0.7	2,045	2.3	1.6	2.9	2,582	1.3	1.0	1.7	4,627
Rivers	2.6	1.6	3.5	1,520	4.7	3.6	5.9	1,885	3.6	2.8	4.3	3,405
Sokoto	0.4	0.1	0.7	1,549	0.4	0.1	0.7	1,902	0.4	0.1	0.7	3,451
Taraba	1.7	1.2	2.1	2,712	3.4	2.5	4.3	3,279	2.5	1.9	3.1	5,991
Yobe	0.5	0.1	0.9	1,821	0.3	0.0	0.5	1,959	0.4	0.1	0.7	3,780
Zamfara	0.4	0.0	0.8	853	0.5	0.1	0.9	1,224	0.4	0.1	0.8	2,077
Marital status												
Never married	0.4	0.3	0.5	31,494	1.2	1.0	1.4	22,341	0.7	0.6	0.8	53,835
Married or living together	1.2	1.1	1.4	31,925	1.4	1.3	1.6	54,824	1.3	1.2	1.5	86,749
Divorced or separated	3.2	1.8	4.6	912	5.8	4.7	6.8	2,447	4.9	4.1	5.8	3,359
Widowed	6.8	3.1	10.5	223	9.1	7.7	10.5	2,726	8.9	7.6	10.2	2,949
Type of union												
In polygynous union	1.1	0.8	1.4	5,130	1.1	1.0	1.3	18,592	1.1	1.0	1.3	23,722
Not in polygynous union	1.2	1.0	1.4	26,586	1.6	1.5	1.8	35,873	1.4	1.3	1.5	62,459
Not currently in union	0.5	0.4	0.6	32,629	2.3	2.0	2.5	27,514	1.2	1.1	1.3	60,143
Education⁴												
No education	0.8	0.5	1.0	6,719	1.2	1.0	1.4	19,915	1.1	0.9	1.2	26,634
Primary	1.1	0.9	1.3	9,748	2.6	2.3	2.9	14,651	1.9	1.7	2.1	24,399
Secondary	0.9	0.7	1.0	31,247	1.8	1.7	2.0	33,513	1.3	1.2	1.4	64,760
Tertiary	0.7	0.6	0.9	12,357	1.8	1.5	2.2	9,693	1.1	1.0	1.3	22,050
Others	0.4	0.1	0.6	4,570	0.6	0.3	0.9	4,573	0.5	0.3	0.7	9,143

Table 7.B HIV prevalence by demographic characteristics, persons aged 15-49 years (continued)												
HIV prevalence among persons aged 15-49 years by sex and selected socio-demographic characteristics, NAIIS 2018												
Socio-demographic characteristics	Males				Females				Total			
	Percent HIV positive	LCL ¹	UCL ²	Number	Percent HIV positive	LCL ¹	UCL ²	Number	Percent HIV positive	LCL ¹	UCL ²	Number
Wealth quintile												
Lowest	0.5	0.4	0.6	12,206	1.0	0.8	1.1	15,076	0.7	0.6	0.9	27,282
Second	0.7	0.5	0.9	12,673	1.4	1.2	1.6	16,078	1.0	0.9	1.2	28,751
Middle	0.9	0.7	1.1	13,583	2.3	2.1	2.6	17,320	1.6	1.4	1.8	30,903
Fourth	1.0	0.8	1.2	13,772	2.1	1.9	2.4	17,793	1.5	1.4	1.7	31,565
Highest	1.0	0.7	1.2	12,433	1.7	1.5	2.0	16,152	1.3	1.2	1.5	28,585
Pregnancy status												
Currently pregnant	NA	NA	NA	NA	1.1	0.9	1.4	6,991	NA	NA	NA	NA
Not currently pregnant	NA	NA	NA	NA	1.8	1.7	1.9	74,326	NA	NA	NA	NA
Total 15-49 years	0.8	0.7	0.9	64,667	1.7	1.6	1.9	82,419	1.3	1.2	1.4	147,086

¹LCL – lower confidence limit.

²UCL – upper confidence limit.

³FCT – Federal Capital Territory.

⁴Education categories refer to the highest level of education attended, whether that level was completed.

NA – not applicable.

Table 7.C HIV prevalence by sex and age

HIV prevalence among persons aged 0-64 years by sex and age, NAIIS 2018

Age	Males		Females		Total	
	Percentage HIV positive	Number	Percentage HIV positive	Number	Percentage HIV positive	Number
0-17 months	0.1	1,159	0.3	1,132	0.2	2,291
18-59 months	0.1	3,937	0.1	3,697	0.1	7,634
5-9 years	0.1	6,505	0.1	6,276	0.1	12,781
10-14 years	0.2	4,972	0.2	4,816	0.2	9,788
15-19 years	0.1	13,344	0.3	15,553	0.2	28,897
20-24 years	0.3	10,368	1.3	14,058	0.8	24,426
25-29 years	0.7	10,592	1.8	14,878	1.2	25,470
30-34 years	1.0	9,067	2.2	12,326	1.6	21,393
35-39 years	1.4	8,623	3.1	10,705	2.2	19,328
40-44 years	1.7	6,904	2.6	8,645	2.2	15,549
45-49 years	2.2	5,769	2.7	6,254	2.4	12,023
50-54 years	2.3	5,053	2.3	5,933	2.3	10,986
55-59 years	1.6	3,773	2.4	3,339	2.0	7,112
60-64 years	1.4	4,477	1.5	4,055	1.4	8,532
Total 0-4 years	0.1	5,096	0.2	4,829	0.1	9,925
Total 0-14 years	0.1	16,573	0.2	15,921	0.1	32,494
Total 15-24 years	0.2	23,712	0.8	29,611	0.5	53,323
Total 15-49 years	0.8	64,667	1.7	82,419	1.3	147,086
Total 15-64 years	1.0	77,970	1.8	95,746	1.4	173,716

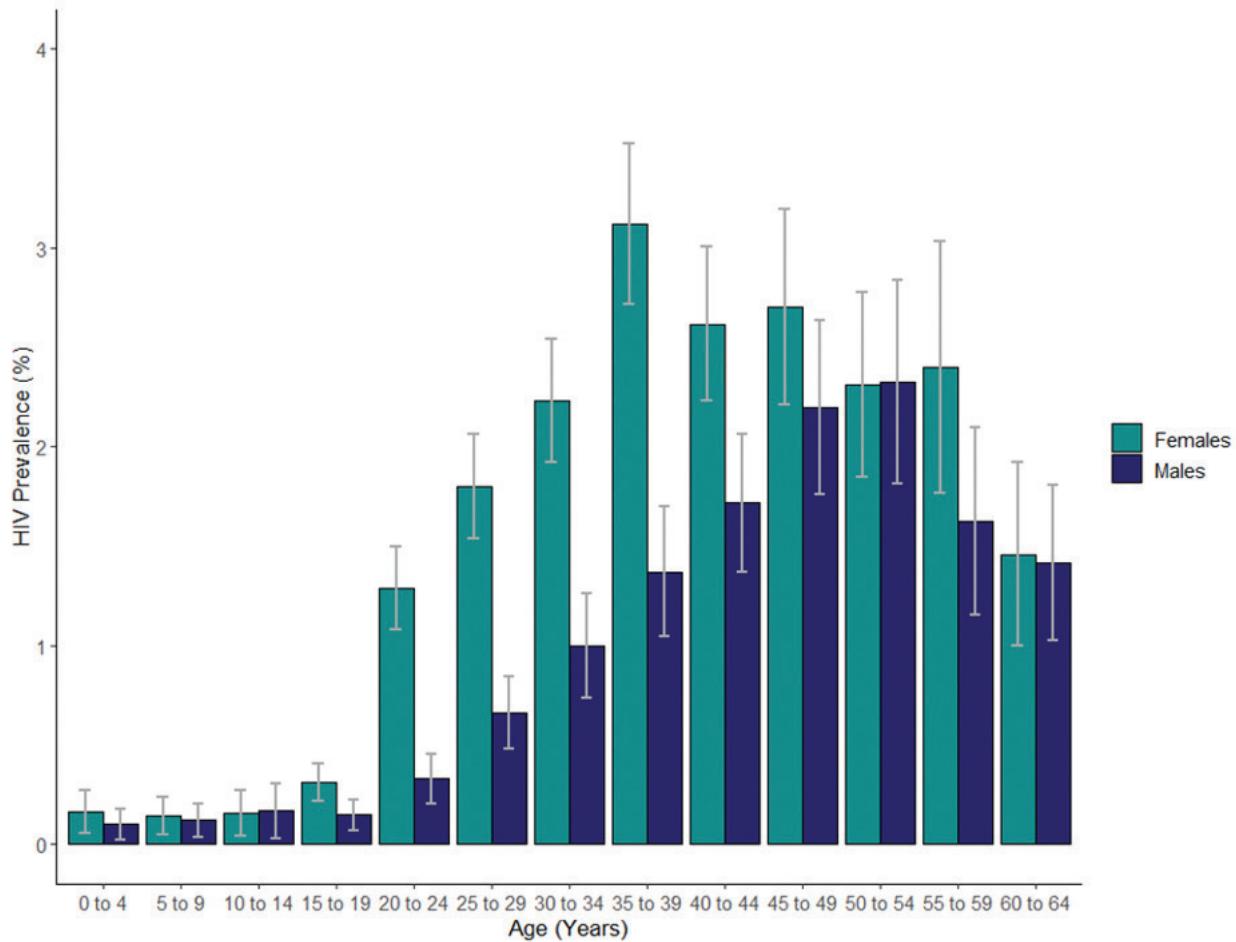


Figure 7.B HIV prevalence by sex and age, NAIIS 2018

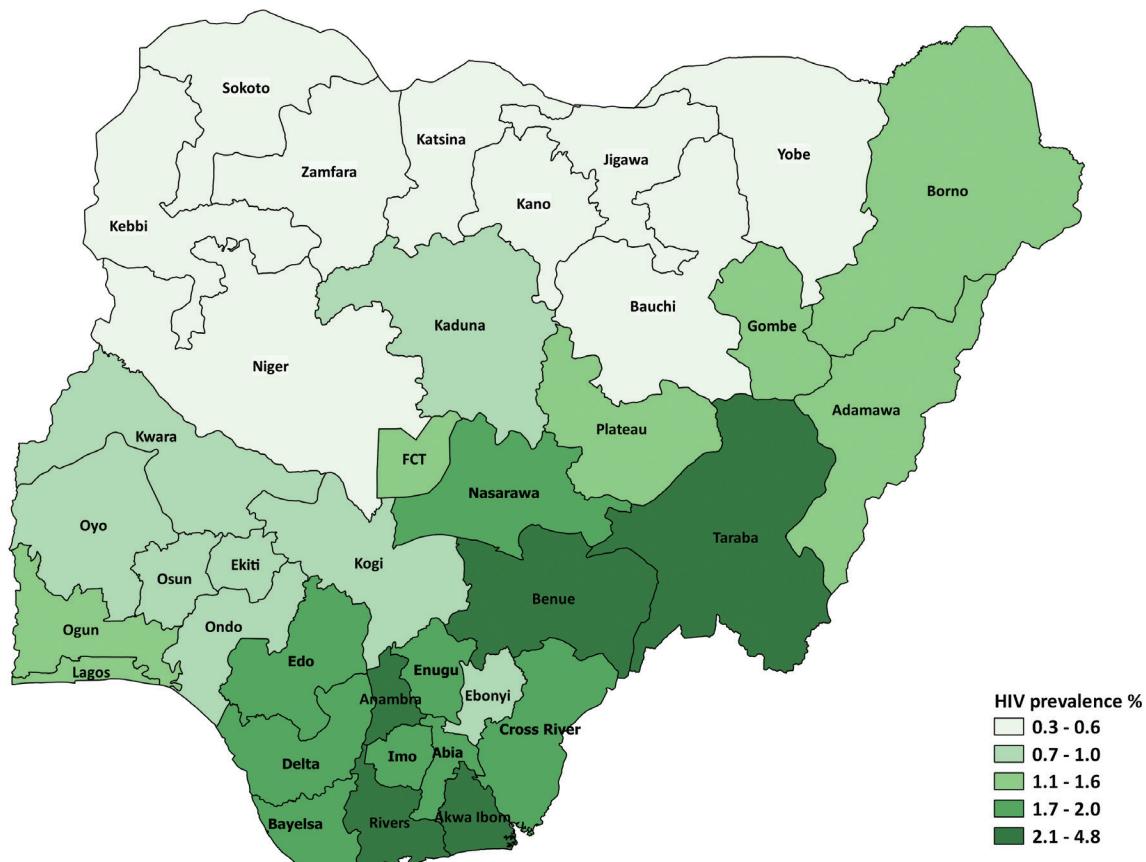


Figure 7.C HIV prevalence among adults aged 15-64 years by state, NAIIS 2018

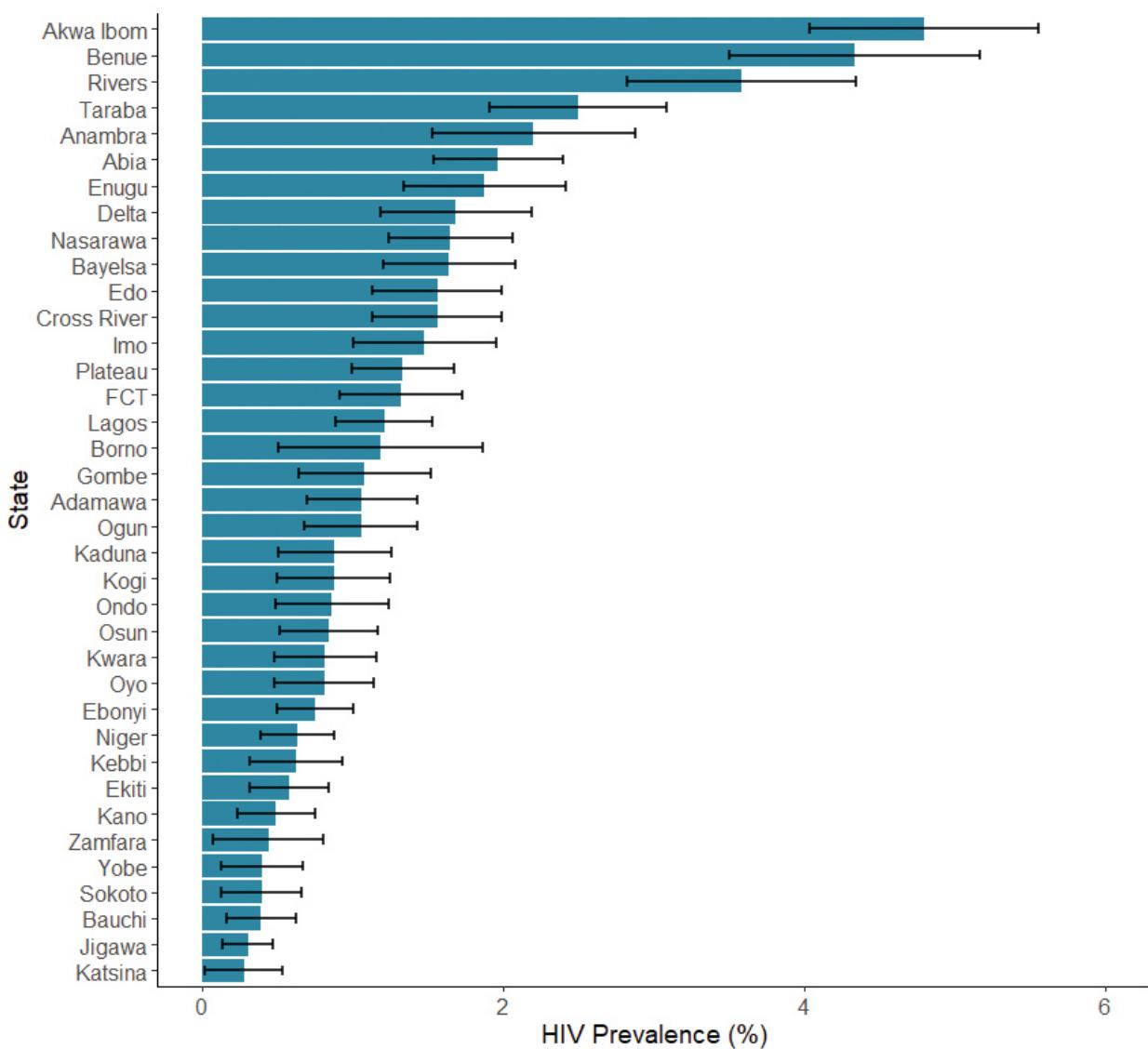


Figure 7.D HIV prevalence among adults aged 15-49 years by state, NAIIS 2018

8. SELF-REPORTED HIV TESTING

8.1 Background

HIV testing is necessary for awareness of HIV status and is a critical component of HIV epidemic control. Awareness of HIV-positive status is the first step to engagement with HIV care and treatment services, accessing ART, prevention counseling for HIV-positive and HIV-negative individuals to reduce risk of HIV transmission or acquisition and access to screening services for other co-morbidities.

8.2 Results

Tables 8.A to 8.C and Figure 8.A show the results of receipt of HIV test results ever and in the last 12 months.

8.2.1 Key Findings

- Among adults aged 15-64 years, 30.1% self-reported ever having received HIV test results (32.6% among women and 27.7% among men) (Tables 8.A, 8.B and 8.C).
- Among adults aged 15-64 years, 36.8% in urban areas self-reported ever having received HIV test results compared to 23.8% in rural areas (Table 8.C).

Table 8.A Self-reported HIV testing: Men

Percentage of men aged 15-64 years who ever received an HIV test result and received an HIV test result in the past 12 months, by result of NAIIS HIV test and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Ever received HIV test result		Received HIV test result in past 12 months	
	Percent	Number	Percent	Number
NAIIS HIV test result				
HIV positive	54.6	824	16.9	800
HIV negative	27.2	75,836	9.1	74,072
Not tested	30.6	5,247	14.7	5,124
Place of residence				
Urban	32.8	34,049	11.2	33,065
Rural	23.0	47,858	8.0	46,931
Geopolitical zone				
North West	11.2	14,969	4.1	14,892
North East	19.9	15,243	6.6	15,055
North Central	32.9	16,621	14.0	16,225
South East	46.2	11,174	13.4	10,682
South South	40.5	11,891	14.8	11,567
South West	33.8	12,009	10.7	11,575
Marital status				
Never married	19.8	33,676	7.8	33,115
Married or living together	34.5	46,189	11.0	44,907
Divorced or separated	36.5	1,321	12.4	1,284
Widowed	44.0	603	11.6	576
Type of union				
In polygynous union	21.1	8,422	7.4	8,289
Not in polygynous union	37.3	37,456	11.9	36,327
Not currently in union	20.6	35,600	7.9	34,975
Education¹				
No education	8.3	9,627	2.6	9,541
Primary	22.5	14,276	6.3	13,920
Secondary	26.5	35,801	9.0	34,963
Tertiary	54.6	15,790	20.8	15,191
Others	8.1	6,358	2.7	6,329

Table 8.A Self-reported HIV testing: Men (continued)

Percentage of men aged 15-64 years who ever received an HIV test result and received an HIV test result in the past 12 months, by result of NAIIS HIV test and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Ever received HIV test result		Received HIV test result in past 12 months	
	Percent	Number	Percent	Number
Wealth quintile				
Lowest	9.8	15,549	3.5	15,428
Second	16.9	15,875	6.0	15,646
Middle	25.3	17,245	8.4	16,844
Fourth	33.7	17,257	11.2	16,743
Highest	47.4	15,981	16.9	15,335
Age (years)				
15-19	6.3	14,095	2.0	13,981
20-24	21.0	10,967	8.7	10,790
25-29	32.1	11,146	13.0	10,887
30-34	39.0	9,547	14.7	9,293
35-39	40.4	9,041	14.2	8,775
40-44	39.7	7,250	11.9	7,040
45-49	37.1	6,071	10.5	5,870
50-54	32.9	5,293	8.1	5,139
55-59	31.5	3,904	8.5	3,777
60-64	26.9	4,593	6.6	4,444
Total 15-24 years	13.0	25,062	5.0	24,771
Total 15-49 years	27.2	68,117	9.8	66,636
Total 15-64 years	27.7	81,907	9.5	79,996

¹Education categories refer to the highest level of education attended, whether that level was completed.

Table 8.B Self-reported HIV testing: Women

Percentage of women aged 15-64 years who ever received an HIV test result and received an HIV test result in the past 12 months, by result of NAIIS HIV test and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Ever received HIV test result		Received HIV test result in past 12 months	
	Percent	Number	Percent	Number
NAIIS HIV test result				
HIV positive	59.2	1,840	19.5	1,762
HIV negative	32.1	90,372	10.4	87,151
Not tested	33.0	6,988	15.6	6,742
Place of residence				
Urban	41.0	42,498	13.6	40,481
Rural	24.7	56,702	8.5	55,174
Geopolitical zone				
North West	16.5	16,808	4.6	16,570
North East	21.5	15,756	7.2	15,369
North Central	30.7	18,757	12.5	18,070
South East	49.6	17,063	16.4	16,149
South South	43.9	14,869	15.5	14,412
South West	42.5	15,947	14.1	15,085
Marital status				
Never married	22.2	23,862	9.2	23,304
Married or living together	36.5	64,457	11.8	61,897
Divorced or separated	45.6	3,180	14.6	3,035
Widowed	29.9	7,602	7.9	7,326
Type of union				
In polygynous union	22.5	21,942	6.5	21,348
Not in polygynous union	44.0	42,077	14.6	40,134
Not currently in union	25.6	34,644	9.4	33,665
Education¹				
No education	12.9	26,139	3.9	25,652
Primary	30.0	19,317	8.4	18,605
Secondary	39.2	36,707	13.7	35,201
Tertiary	69.6	11,641	26.7	10,896
Others	14.7	5,302	3.8	5,212

Table 8.B Self-reported HIV testing: Women (continued)

Percentage of women aged 15-64 years who ever received an HIV test result and received an HIV test result in the past 12 months, by result of NAIIS HIV test and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Ever received HIV test result		Received HIV test result in past 12 months	
	Percent	Number	Percent	Number
Wealth quintile				
Lowest	12.4	17,407	3.7	17,136
Second	18.8	19,071	6.1	18,597
Middle	29.3	21,415	9.7	20,689
Fourth	40.7	21,649	13.8	20,725
Highest	55.0	19,658	19.3	18,508
Age (years)				
15-19	11.4	16,232	5.0	16,039
20-24	33.7	14,610	13.8	14,090
25-29	45.0	15,401	17.1	14,730
30-34	45.4	12,733	15.2	12,184
35-39	45.5	11,040	13.5	10,537
40-44	36.8	8,914	9.2	8,558
45-49	33.9	6,464	8.8	6,216
50-54	26.6	6,119	7.0	5,903
55-59	26.4	3,529	7.4	3,388
60-64	20.3	4,158	4.1	4,010
Total 15-24 years	21.4	30,842	8.9	30,129
Total 15-49 years	33.7	85,394	11.6	82,354
Total 15-64 years	32.6	99,200	10.9	95,655

¹Education categories refer to the highest level of education attended, whether that level was completed.

Table 8.C Self-reported HIV testing: Total

Percentage of HIV-positive persons aged 15-64 years who ever received an HIV test result and received an HIV test result in the past 12 months, by result of NAIIS HIV test and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Ever received HIV test result		Received HIV test result in past 12 months	
	Percent	Number	Percent	Number
NAIIS HIV test result				
HIV positive	57.6	2,664	18.6	2,562
HIV negative	29.5	166,208	9.7	161,223
Not tested	31.8	12,235	15.2	11,866
Place of residence				
Urban	36.8	76,547	12.4	73,546
Rural	23.8	104,560	8.2	102,105
Geopolitical zone				
North West	13.7	31,777	4.3	31,462
North East	20.7	30,999	6.9	30,424
North Central	31.9	35,378	13.3	34,295
South East	48.0	28,237	15.0	26,831
South South	42.2	26,760	15.1	25,979
South West	38.1	27,956	12.3	26,660
Marital status				
Never married	20.7	57,538	8.3	56,419
Married or living together	35.6	110,646	11.4	106,804
Divorced or separated	42.5	4,501	13.9	4,319
Widowed	31.0	8,205	8.2	7,902
Type of union				
In polygynous union	22.1	30,364	6.8	29,637
Not in polygynous union	40.5	79,533	13.2	76,461
Not currently in union	22.7	70,244	8.6	68,640
Education¹				
No education	11.5	35,766	3.5	35,193
Primary	26.4	33,593	7.4	32,525
Secondary	32.1	72,508	11.0	70,164
Tertiary	60.0	27,431	22.9	26,087
Others	11.0	11,660	3.2	11,541

Table 8.C Self-reported HIV testing: Total (continued)

Percentage of HIV-positive persons aged 15-64 years who ever received an HIV test result and received an HIV test result in the past 12 months, by result of NAIIS HIV test and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Ever received HIV test result		Received HIV test result in past 12 months	
	Percent	Number	Percent	Number
Wealth quintile				
Lowest	11.0	32,956	3.6	32,564
Second	17.8	34,946	6.0	34,243
Middle	27.3	38,660	9.0	37,533
Fourth	37.2	38,906	12.5	37,468
Highest	51.0	35,639	18.1	33,843
Age (years)				
15-19	8.8	30,327	3.5	30,020
20-24	27.1	25,577	11.1	24,880
25-29	38.3	26,547	14.9	25,617
30-34	42.1	22,280	14.9	21,477
35-39	42.9	20,081	13.9	19,312
40-44	38.3	16,164	10.6	15,598
45-49	35.6	12,535	9.7	12,086
50-54	29.8	11,412	7.6	11,042
55-59	29.0	7,433	8.0	7,165
60-64	23.5	8,751	5.4	8,454
Total 15-24 years	17.1	55,904	6.9	54,900
Total 15-49 years	30.4	153,511	10.6	148,990
Total 15-64 years	30.1	181,107	10.2	175,651

¹Education categories refer to the highest level of education attended, whether that level was completed.

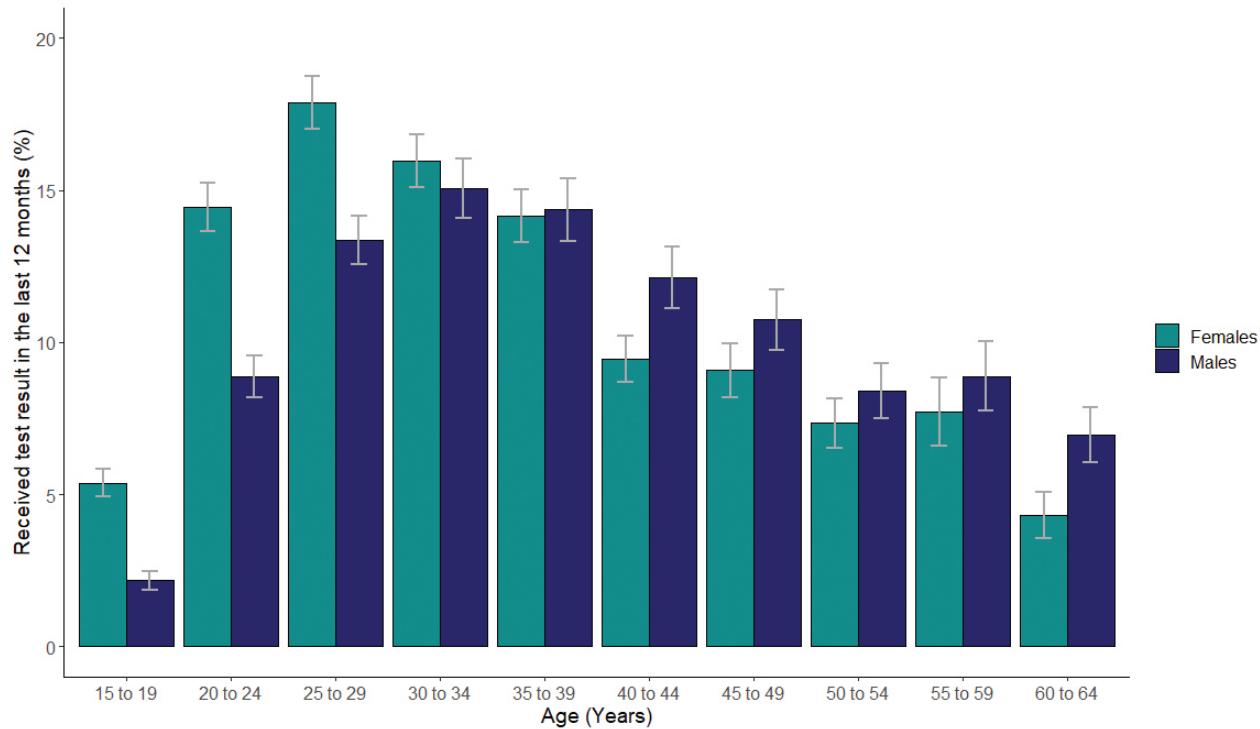


Figure 8.A Proportion of adults aged 15-64 years who self-report receiving HIV test results in the last 12 months by sex and age, NAIIS 2018

9. HIV DIAGNOSIS AND TREATMENT

9.1 Background

Recent studies have proven that treating PLHIV at higher CD4 counts improves immune recovery, decreases the incidence of non-AIDS events and comorbidities and mortality and reduces sexual and vertical transmission. In 2016, after an extensive review of evidence of both the clinical and population-level benefits of expanding ART, WHO changed its recommendation to support a policy of “Treatment for All,” regardless of CD4 count.^{1,2} In Nigeria, the “test and treat” policy was adopted in December 2016. NAIIS determined the presence of four ARVs (efavirenz, lopinavir, nevirapine and atazanavir) in blood as markers of the first- and second-line regimens prescribed in Nigeria at the time of the survey.

9.2 Results

Tables 9.A to 9.F and Figure 9.A describe ART uptake in Nigeria during NAIIS.

9.2.1 Key Findings

- Among HIV- positive adults aged 15-64 years, 71.1% self-reported being unaware of their HIV status (Table 9.C).
- Of HIV- positive adults aged 15-64 years, 25.9% reported being on ART (Table 9.C).
- The percentage of HIV- positive adults aged 15-64 years unaware of their HIV status was higher in rural areas (74.0%) than urban areas (67.4%) (Table 9.C).
- Among individuals who self-reported an HIV- positive status and being on ART, 94.5% had ARVs detected in their blood. Among those who self-reported an HIV- positive status and not being on ART, 42.0% had ARVs detected in their blood (Table 9.F).
- Among those who self-reported not being previously diagnosed, 24.4% had ARVs detected in their blood (Table 9.F).

9.3 References

1. World Health Organization. *Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection*. Geneva: World Health Organization; 2016. <https://www.who.int/hiv/pub/arn/arn-2016/en/>. Accessed March 10, 2019.
2. World Health Organization. *Treat all: Policy adoption and implementation status in countries*. Geneva: World Health Organization; 2017. <http://apps.who.int/iris/bitstream/handle/10665/259532/WHO-HIV-2017.58-eng.pdf;jsessionid=B3857967C208CC9E4093EEA9CEDC3A0C?sequence=1>. Accessed March 10, 2019.

Table 9.A HIV treatment status: Men

Percent distribution of HIV-positive men aged 15-64 years by self-reported HIV and treatment status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Unaware of HIV status	Aware of HIV status			Total	Number
		Not on ART	On ART ¹	Total		
Place of residence						
Urban	72.7	1.4	26.0	100.0	310	
Rural	73.0	1.9	25.1	100.0	518	
Geopolitical zone						
North West	66.5	1.0	32.5	100.0	55	
North East	76.2	0.8	23.0	100.0	137	
North Central	50.9	1.5	47.6	100.0	185	
South East	78.4	2.9	18.7	100.0	147	
South South	79.7	2.1	18.2	100.0	217	
South West	79.6	1.0	19.4	100.0	87	
Marital status						
Never married	90.0	0.7	9.3	100.0	160	
Married or living together	68.8	2.0	29.1	100.0	589	
Divorced or separated	60.9	2.3	36.7	100.0	42	
Widowed	64.3	0.0	35.7	100.0	36	
Type of union						
In polygynous union	69.3	4.6	26.2	100.0	90	
Not in polygynous union	68.4	1.6	29.9	100.0	496	
Not currently in union	81.9	0.9	17.3	100.0	238	
Education²						
No education	82.6	0.3	17.1	100.0	75	
Primary	73.0	1.5	25.4	100.0	199	
Secondary	77.7	1.6	20.7	100.0	365	
Tertiary	55.3	2.9	41.8	100.0	163	
Others	*	*	*	*	26	
Wealth quintile						
Lowest	76.4	1.1	22.5	100.0	101	
Second	67.5	2.2	30.4	100.0	141	
Middle	70.3	2.7	27.1	100.0	205	
Fourth	71.9	1.2	26.8	100.0	203	
Highest	77.6	1.2	21.2	100.0	178	

Table 9.A HIV treatment status: Men (continued)

Percent distribution of HIV-positive men aged 15-64 years by self-reported HIV and treatment status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Unaware of HIV status	Aware of HIV status			Total	Number
		Not on ART	On ART ¹	Total		
Age (years)						
15-19	*	*	*	*	23	
20-24	88.3	0.0	11.7	100.0	37	
25-29	88.7	1.5	9.8	100.0	72	
30-34	84.8	2.0	13.2	100.0	88	
35-39	78.4	1.3	20.3	100.0	116	
40-44	67.8	0.4	31.7	100.0	129	
45-49	63.9	2.5	33.6	100.0	123	
50-54	57.2	1.9	40.9	100.0	111	
55-59	62.5	0.0	37.5	100.0	62	
60-64	57.4	6.6	36.0	100.0	67	
Total 15-24 years	91.1	1.2	7.7	100.0	60	
Total 15-49 years	77.3	1.5	21.2	100.0	588	
Total 15-64 years	72.9	1.7	25.5	100.0	828	

¹Relates to Global AIDS Monitoring indicator 1.2: People living with HIV on antiretroviral therapy.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 9.B HIV treatment status: Women

Percent distribution of HIV-positive women aged 15-64 years by self-reported HIV and treatment status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Unaware of HIV status	Aware of HIV status		Total	Number
		Not on ART	On ART ¹		
Place of residence					
Urban	64.4	4.5	31.1	100.0	736
Rural	74.6	3.1	22.4	100.0	1,096
Geopolitical zone					
North West	68.6	7.2	24.2	100.0	112
North East	67.7	0.9	31.4	100.0	252
North Central	59.9	1.9	38.2	100.0	447
South East	69.3	5.2	25.4	100.0	317
South South	80.3	4.5	15.2	100.0	481
South West	67.1	2.5	30.4	100.0	223
Marital status					
Never married	77.3	3.7	19.0	100.0	302
Married or living together	71.7	3.8	24.5	100.0	972
Divorced or separated	62.4	6.0	31.5	100.0	191
Widowed	62.7	2.3	35.0	100.0	362
Type of union					
In polygynous union	74.1	0.5	25.4	100.0	285
Not in polygynous union	70.8	5.2	24.0	100.0	677
Not currently in union	68.2	3.6	28.2	100.0	855
Education²					
No education	78.3	2.6	19.1	100.0	359
Primary	72.7	2.5	24.8	100.0	503
Secondary	66.0	4.6	29.4	100.0	722
Tertiary	64.6	3.0	32.4	100.0	209
Others	69.7	13.7	16.6	100.0	34
Wealth quintile					
Lowest	82.8	2.7	14.4	100.0	207
Second	68.8	1.8	29.4	100.0	310
Middle	70.4	5.6	24.0	100.0	493
Fourth	66.5	3.0	30.5	100.0	476
Highest	69.1	3.9	27.0	100.0	346

Table 9.B HIV treatment status: Women (continued)

Percent distribution of HIV-positive women aged 15-64 years by self-reported HIV and treatment status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Unaware of HIV status	Aware of HIV status		Total	Number
		Not on ART	On ART ¹		
Age (years)					
15-19	87.0	1.6	11.3	100.0	58
20-24	82.8	6.1	11.1	100.0	186
25-29	78.5	3.1	18.4	100.0	273
30-34	71.3	6.5	22.2	100.0	291
35-39	63.0	5.1	31.9	100.0	346
40-44	60.8	3.5	35.7	100.0	241
45-49	60.0	1.8	38.2	100.0	158
50-54	62.9	0.0	37.1	100.0	145
55-59	75.5	0.0	24.5	100.0	73
60-64	79.5	0.0	20.5	100.0	61
Total 15-24 years	83.8	5.0	11.1	100.0	244
Total 15-49 years	70.0	4.4	25.6	100.0	1,553
Total 15-64 years	70.1	3.7	26.2	100.0	1,832

¹Relates to Global AIDS Monitoring indicator 1.2: People living with HIV on antiretroviral therapy.

²Education categories refer to the highest level of education attended, whether that level was completed.

Table 9.C HIV treatment status: Total

Percent distribution of HIV-positive persons aged 15-64 years by self-reported HIV and treatment status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Unaware of HIV status	Aware of HIV status			Total	Number
		Not on ART	On ART ¹			
Place of residence						
Urban	67.4	3.4	29.2	100.0	1,046	
Rural	74.0	2.6	23.4	100.0	1,614	
Geopolitical zone						
North West	67.8	4.9	27.3	100.0	167	
North East	71.1	0.9	28.0	100.0	389	
North Central	56.9	1.8	41.4	100.0	632	
South East	72.7	4.4	22.9	100.0	464	
South South	80.1	3.6	16.3	100.0	698	
South West	71.4	2.0	26.6	100.0	310	
Marital status						
Never married	82.4	2.5	15.1	100.0	462	
Married or living together	70.4	3.0	26.5	100.0	1,561	
Divorced or separated	62.1	5.2	32.7	100.0	233	
Widowed	62.9	2.0	35.1	100.0	398	
Type of union						
In polygynous union	72.7	1.6	25.6	100.0	375	
Not in polygynous union	69.7	3.5	26.8	100.0	1,173	
Not currently in union	71.8	2.8	25.3	100.0	1,093	
Education²						
No education	79.1	2.1	18.7	100.0	434	
Primary	72.8	2.2	25.0	100.0	702	
Secondary	70.6	3.4	25.9	100.0	1,087	
Tertiary	60.3	2.9	36.8	100.0	372	
Others	72.7	7.2	20.1	100.0	60	
Wealth quintile						
Lowest	80.4	2.1	17.4	100.0	308	
Second	68.3	1.9	29.8	100.0	451	
Middle	70.3	4.7	25.0	100.0	698	
Fourth	68.5	2.4	29.2	100.0	679	
Highest	72.6	2.8	24.6	100.0	524	

Table 9.C HIV treatment status: Total (continued)

Percent distribution of HIV-positive persons aged 15-64 years by self-reported HIV and treatment status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Unaware of HIV status	Aware of HIV status			Total	Number
		Not on ART	On ART ¹			
Age (years)						
15-19	90.1	2.3	7.6	100.0	81	
20-24	84.1	4.7	11.2	100.0	223	
25-29	81.5	2.6	15.9	100.0	345	
30-34	75.6	5.0	19.3	100.0	379	
35-39	68.0	3.9	28.1	100.0	462	
40-44	63.7	2.3	34.1	100.0	370	
45-49	61.8	2.1	36.1	100.0	281	
50-54	60.0	1.0	39.0	100.0	256	
55-59	70.3	0.0	29.7	100.0	135	
60-64	68.8	3.2	28.0	100.0	128	
Total 15-24 years	85.6	4.1	10.3	100.0	304	
Total 15-49 years	72.5	3.4	24.1	100.0	2,141	
Total 15-64 years	71.1	3.0	25.9	100.0	2,660	

¹Relates to Global AIDS Monitoring indicator 1.2: People living with HIV on antiretroviral therapy.

²Education categories refer to the highest level of education attended, whether that level was completed.

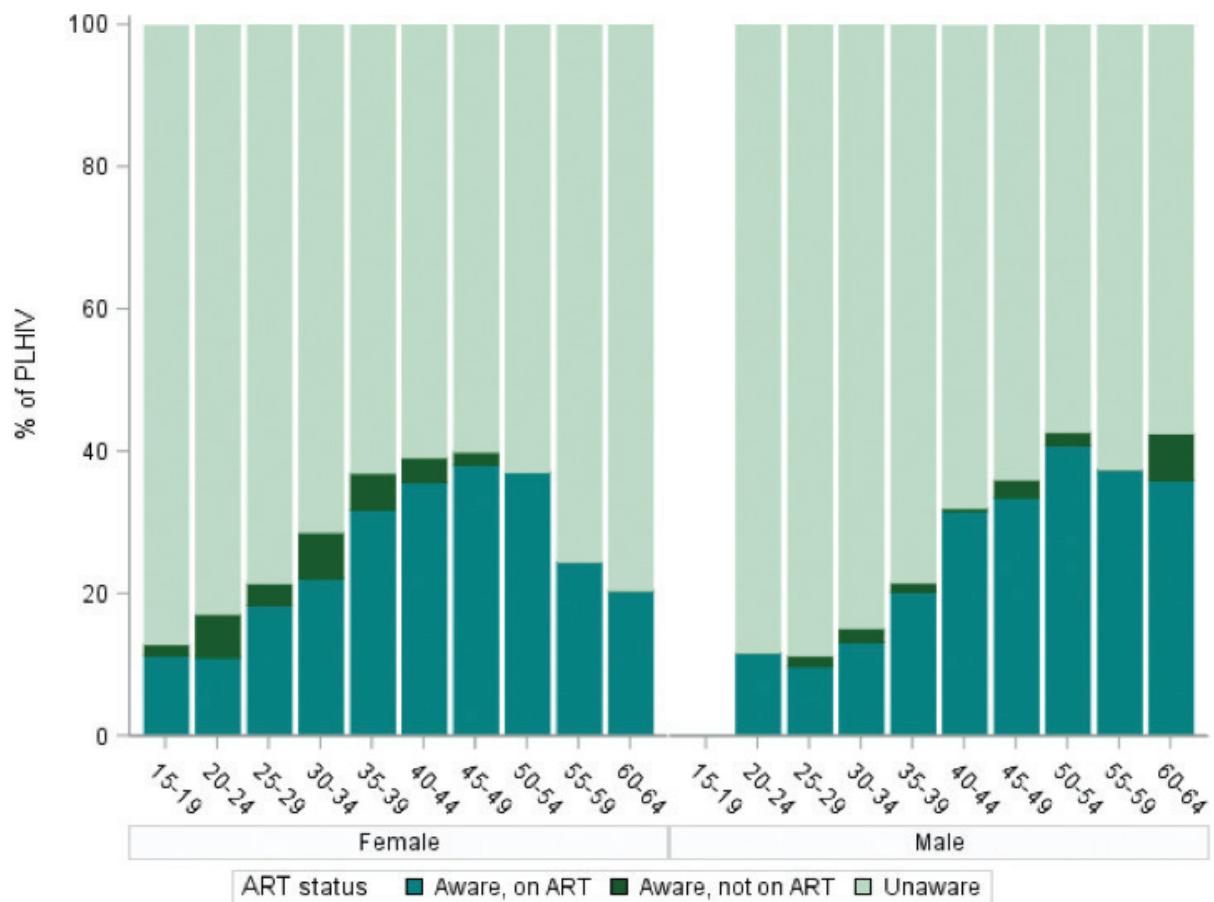


Figure 9.A Proportion of HIV-positive adults reporting awareness of HIV status and ART status by sex and age, NAIIS 2018

The estimates for men aged 15-19 years were not presented because the unweighted sample size was 30 or less people.

Table 9.D Concordance of self-reported treatment status versus presence of antiretrovirals (ARVs): Men

Percent distribution of ARV status by self-reported HIV treatment status among HIV-positive men aged 15-64 years, NAIIS 2018

Characteristics	ARVs ¹		Total	Number
	Not detectable	Detectable		
Self-reported treatment status				
Not previously diagnosed	81.7	18.3	100.0	577
Previously diagnosed, not on ART ²	*	*	*	17
Previously diagnosed, on ART ²	6.6	93.4	100.0	234
Total 15-24 years	72.6	27.4	100.0	61
Total 15-49 years	66.6	33.4	100.0	601
Total 15-64 years	62.1	37.9	100.0	845

¹Antiretroviral detection assay included only atazanavir, efavirenz and lopinavir. Participants who reported antiretroviral therapy use or had an undetectable viral load but had no evidence of the first three ARVs were tested for nevirapine as well.

²ART – antiretroviral therapy.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 9.E Concordance of self-reported treatment status versus presence of antiretrovirals (ARVs): Women

Percent distribution of ARV status by self-reported HIV treatment status among HIV-positive women aged 15-64 years, NAIIS 2018

Characteristics	ARVs ¹		Total	Number
	Not detectable	Detectable		
Self-reported treatment status				
Not previously diagnosed	72.0	28.0	100.0	1,262
Previously diagnosed, not on ART ²	58.7	41.3	100.0	56
Previously diagnosed, on ART ²	4.9	95.1	100.0	508
Total 15-24 years	72.5	27.5	100.0	254
Total 15-49 years	54.8	45.2	100.0	1,602
Total 15-64 years	53.5	46.5	100.0	1,888

¹Antiretroviral detection assay included only atazanavir, efavirenz and lopinavir. Participants who reported antiretroviral therapy use or had an undetectable viral load but had no evidence of the first three ARVs were tested for nevirapine as well.

²ART – antiretroviral therapy.

Table 9.F Concordance of self-reported treatment status versus presence of antiretrovirals (ARVs): Total

Percent distribution of ARV status by self-reported HIV treatment status among HIV-positive persons aged 15-64 years, NAIIS 2018

Characteristics	ARVs ¹		Total	Number
	Not detectable	Detectable		
Self-reported treatment status				
Not previously diagnosed	75.6	24.4	100.0	1,839
Previously diagnosed, not on ART ²	58.0	42.0	100.0	73
Previously diagnosed, on ART ²	5.5	94.5	100.0	742
Total 15-24 years	72.5	27.5	100.0	315
Total 15-49 years	58.8	41.2	100.0	2,203
Total 15-64 years	56.6	43.4	100.0	2,733

¹Antiretroviral detection assay included only atazanavir, efavirenz and lopinavir. Participants who reported antiretroviral therapy use or had an undetectable viral load but had no evidence of the first three ARVs were tested for nevirapine as well.

²ART – antiretroviral therapy.

10. VIRAL LOAD SUPPRESSION

10.1 Background

The key treatment success indicator for PLHIV is VLS. For NAIIS, VLS was defined as VL less than 1,000 HIV RNA copies per mL of plasma. This chapter describes VLS among the population of HIV-positive adults by socio-demographic characteristics.

10.2 Results

Tables 10.A and 10.B, along with Figures 10.A to 10.D, present VLS data of PLHIV.

10.2.1 Key Findings

- Among adults aged 15-64 years who tested HIV positive, 43.1% had VLS (women 45.5%, men 38.8%). The prevalence of VLS was lower in rural than urban areas (40.3% and 46.7%, respectively) (Table 10.A).
- Among adults previously diagnosed and self-reported on ART, VLS was 82.5% (Table 10.A).
- VLS was lowest among those never married (31.6%) and highest in those who were widowed (52.9%) (Table 10.A).
- VLS was highest among adults in the North Central Zone (63.8%) and lowest among adults in the South South Zone (31.1%) (Table 10.A).
- VLS varied by age group, ranging from 31.2% among adults aged 20-24 years to 55.6% among adults aged 50-54 years (Table 10.B).

Table 10.A Viral load suppression prevalence by demographic characteristics						
Socio-demographic characteristics	Males		Females		Total	
	Percentage VLS	Number	Percentage VLS	Number	Percentage VLS	Number
Self-reported diagnosis and treatment status						
Not previously diagnosed	24.9	577	31.2	1,267	28.8	1,844
Previously diagnosed, not on ART	*	17	40.0	56	39.7	73
Previously diagnosed, on ART	79.5	234	84.2	509	82.5	743
Place of residence						
Urban	38.9	319	51.1	759	46.7	1,078
Rural	38.7	526	41.2	1,135	40.3	1,661
Geopolitical zone						
North West	52.1	55	43.7	120	46.7	175
North East	46.4	141	51.5	262	49.5	403
North Central	60.0	189	65.7	462	63.8	651
South East	35.2	148	37.5	329	36.6	477
South South	27.2	221	33.3	491	31.1	712
South West	26.9	91	48.8	230	41.2	321
Marital status						
Never married	25.6	163	35.6	313	31.6	476
Married or living together	43.3	601	46.1	1,008	44.9	1,609
Divorced or separated	35.6	44	43.0	197	41.3	241
Widowed	36.1	36	54.8	371	52.9	407
Type of union						
In polygynous union	46.7	91	44.2	304	44.9	395
Not in polygynous union	43.3	507	47.1	694	45.3	1,201
Not currently in union	28.7	243	45.1	881	40.8	1,124
Education²						
No education	41.6	77	50.3	377	48.5	454
Primary	40.6	203	38.5	517	39.2	720
Secondary	35.5	375	45.6	741	41.6	1,116
Tertiary	45.0	164	55.7	217	50.7	381
Others	*	26	28.8	37	31.2	63

Table 10.A Viral load suppression prevalence by demographic characteristics (continued)						
Socio-demographic characteristics	Males		Females		Total	
	Percentage VLS	Number	Percentage VLS	Number	Percentage VLS	Number
Wealth quintile						
Lowest	49.0	102	45.3	215	46.6	317
Second	42.2	144	43.7	322	43.2	466
Middle	38.0	211	42.2	503	40.8	714
Fourth	40.7	206	50.6	498	47.2	704
Highest	31.8	182	44.9	356	39.6	538
Total 15-24 years	33.6	61	32.2	255	32.6	316
Total 15-49 years	33.5	601	44.7	1,607	40.9	2,208
Total 15-64 years	38.8	845	45.5	1,894	43.1	2,739

¹Relates to [Global AIDS Monitoring indicator 1.4: People living with HIV who have suppressed viral loads](#).

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 10.B Viral load suppression by age (5-year age groups)

Percentage distribution of HIV-positive persons aged 0-64 years with viral load suppression (VLS) (<1,000 copies/mL)¹ by sex and age, NAIIS 2018

Age (years)	Males		Females		Total	
	Percentage VLS	Number	Percentage VLS	Number	Percentage VLS	Number
0-4	*	7	*	10	*	17
5-9	*	9	*	10	*	19
10-14	*	7	*	8	*	15
15-19	*	24	32.6	58	36.5	82
20-24	27.9	37	32.1	197	31.2	234
25-29	14.8	72	39.5	282	32.6	354
30-34	24.7	92	40.0	302	35.1	394
35-39	37.5	116	51.5	356	47.1	472
40-44	38.0	132	53.5	251	47.2	383
45-49	44.0	128	54.6	161	49.7	289
50-54	58.8	114	52.5	149	55.6	263
55-59	45.5	63	48.2	76	47.2	139
60-64	62.5	67	47.8	62	54.8	129
Total 15-24 years	33.6	61	32.2	255	32.6	316
Total 15-49 years	33.5	601	44.7	1,607	40.9	2,208
Total 15-64 years	38.8	845	45.5	1,894	43.1	2,739

¹Relates to Global AIDS Monitoring indicator 1.4: People living with HIV who have suppressed viral loads.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

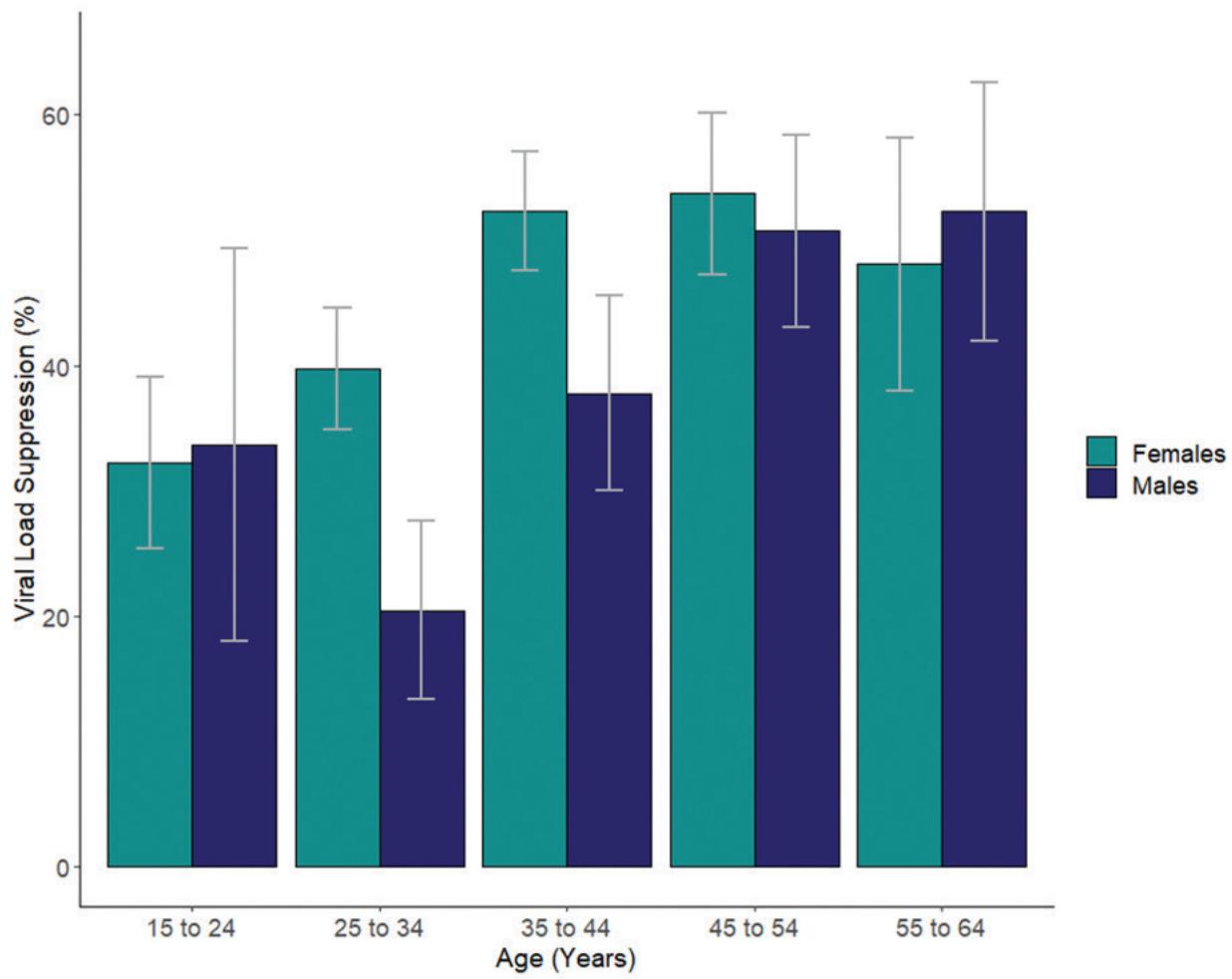


Figure 10.A Proportion of viral load suppression among HIV-positive persons by sex and age, NAIIS 2018
The estimates for children aged 0-14 years were not presented because the unweighted sample size was 30 or less people.

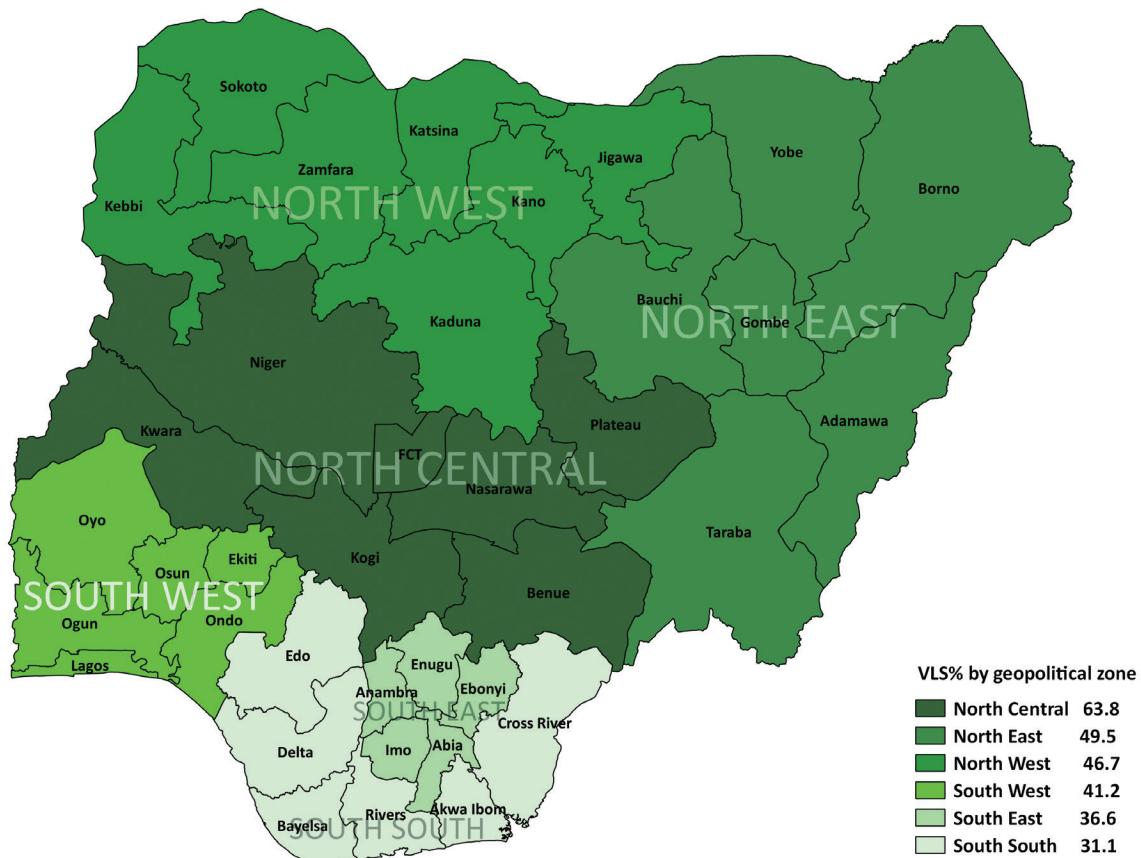


Figure 10.B Viral load suppression (VLS) (<1,000 copies/mL) among HIV-positive adults aged 15-64 years by geopolitical zone, NAIIS 2018

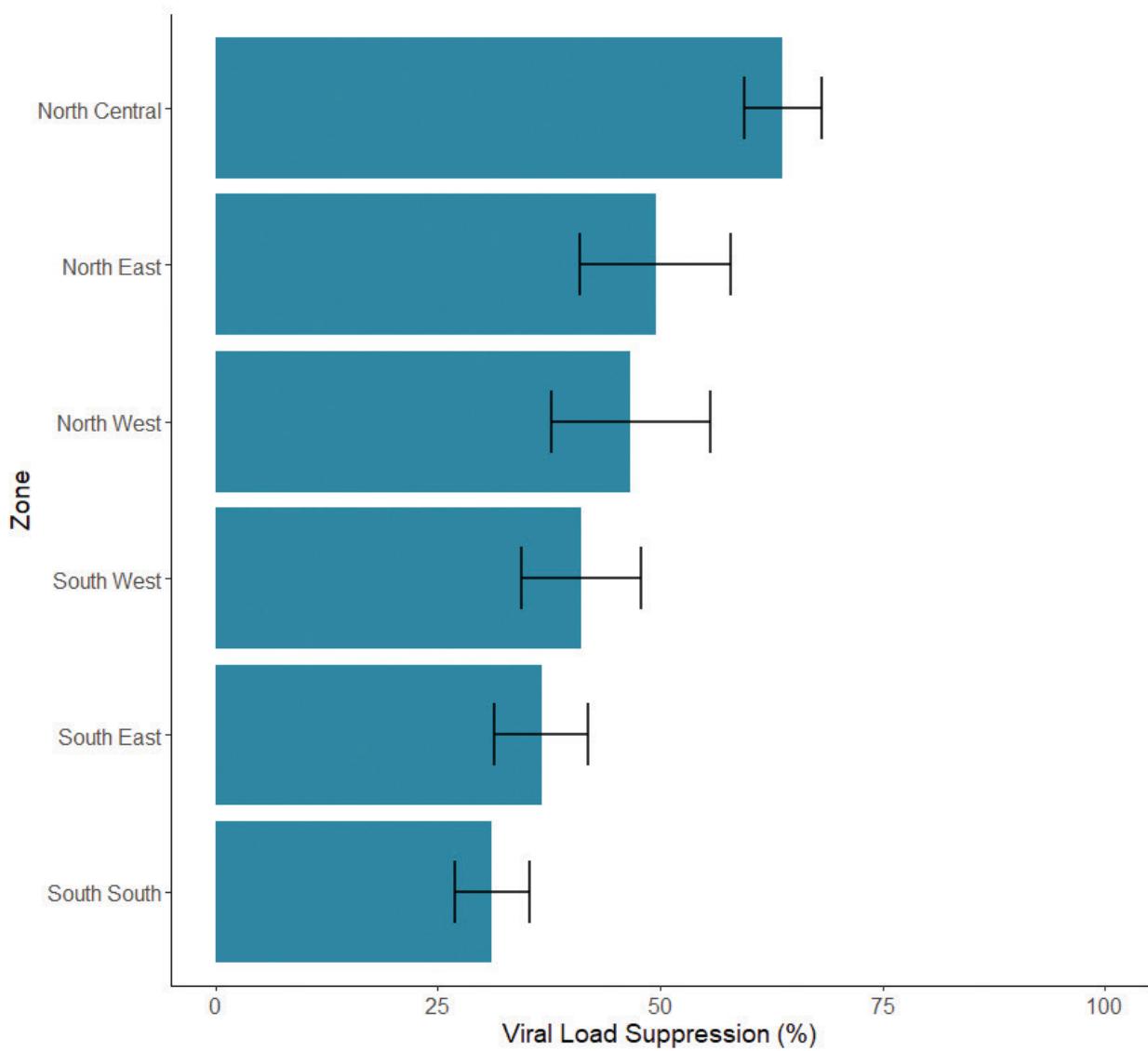


Figure 10.C Viral load suppression (<1000, copies/mL) among HIV-positive adults aged 15-64 years by geopolitical zone, NAIIS 2018

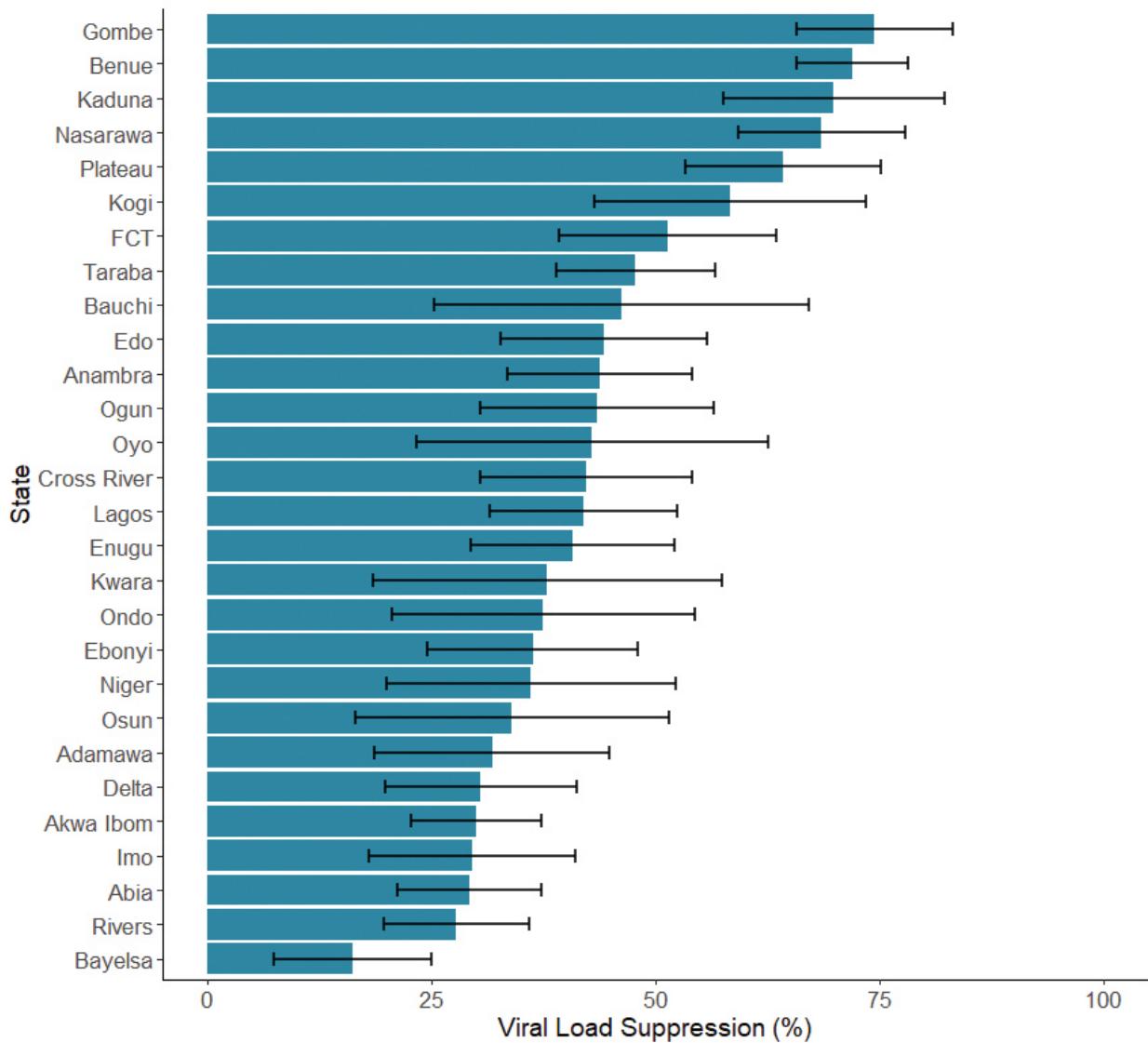


Figure 10.D Viral load suppression among HIV-positive adults aged 15-64 years by state, NAIIS 2018
The estimates were not presented for states where the unweighted sample size was 30 or less people.

11. UNAIDS 90-90-90 TARGETS

11.1 Background

UNAIDS set ambitious targets referred to as 90-90-90 to bring the HIV epidemic under control. The 90-90-90 targets propose that by 2020, 90% of all PLHIV will know their HIV status; 90% of all persons diagnosed with HIV will receive sustained ART; and 90% of all persons receiving ART will have VLS.¹ Awareness of HIV-positive status and treatment status among PLHIV who know their HIV-positive status are indicators of access to services. VLS among individuals who know their HIV status and are on treatment provides a marker of access to and retention in care and a measure of program success. VLS of 73% ($90 \times 90 \times 90$) or greater among all PLHIV is an indication of successful testing and treatment services.

The 90-90-90 results are presented first as self-report and second as verified by ARV biomarker data. In the first case, participants were defined as ‘aware’ of their HIV-positive status if they self-reported knowing they were HIV positive before NAIIS HIV testing and ‘on treatment’ if they self-reported ART use. In the second case, self-reported ‘aware’ and ‘on treatment’ have been adjusted to include participants with ARV biomarkers detected in their blood specimen as ‘aware’ and ‘on treatment’ even when they did not self-report. In both sets of results, individuals who had achieved VLS but were not aware of their HIV-positive status or were not on ARVs, either by self-report or ARV biomarker data, were excluded from the numerator for the third 90.

11.2 Results

Tables 11.A to 11.C, along with Figure 11.A, show progress towards attaining the 90-90-90 targets in adults at the time of NAIIS.

11.2.1 Key Findings

- Diagnosed: Among HIV-positive adults aged 15-64 years, 46.9% self-reported knowing their HIV status or had detectable ARVs in their blood (40.9% of men and 50.3% of women) (Table 11.B).
- On Treatment: Among HIV-positive adults aged 15-64 years who knew their HIV status, 96.4% self-reported being on ART or had detectable ARVs (97.8% of men and 95.8% of women) (Table 11.B).
- Suppressed Viral Load: Among HIV-positive adults aged 15-64 years who self-reported being on ART or had detectable ARVs, 80.9% had VLS (79.2% of men and 81.7% of women) (Table 11.B).

11.3 References

1. Joint United Nations Programme on HIV/AIDS (UNAIDS). 90-90-90: An ambitious treatment target to help end the AIDS epidemic. Geneva: UNAIDS; 2014.

http://www.unaids.org/sites/default/files/media_asset/90-90-90_en_0.pdf. Accessed March 10, 2019.

Table 11.A Adult self-reported ART status: Conditional percentages

90-90-90 targets among people living with HIV aged 15-64 years by sex and age, NAIIS 2018

Diagnosed ¹						
Age (years)	Males		Females		Total	
	Percentage who self-reported HIV- positive diagnosis	Number	Percentage who self-reported HIV-positive diagnosis	Number	Percentage who self-reported HIV- positive diagnosis	Number
15-24	8.9	60	16.2	244	14.4	304
25-34	13.5	160	25.2	564	21.7	724
35-49	29.9	368	38.4	745	35.1	1,113
15-49	22.7	588	30.0	1,553	27.5	2,141
15-64	27.1	828	29.9	1,832	28.9	2,660
On Treatment, ² among those diagnosed						
Age (years)	Males		Females		Total	
	Percentage who self-reported being on ART ²	Number	Percentage who self-reported being on ART ²	Number	Percentage who self-reported being on ART ²	Number
15-24	*	5	68.9	42	71.6	47
25-34	*	22	80.8	145	81.9	167
35-49	95.3	124	90.1	284	91.8	408
15-49	93.4	151	85.4	471	87.7	622
15-64	93.8	251	87.7	565	89.8	816
Virally Suppressed, ³ among those on treatment						
Age (years)	Males		Females		Total	
	Percentage virally suppressed ³	Number	Percentage virally suppressed ³	Number	Percentage virally suppressed ³	Number
15-24	*	4	78.3	31	80.9	35
25-34	*	19	80.1	125	78.6	144
35-49	77.3	117	85.2	259	82.5	376
15-49	77.2	140	83.3	415	81.5	555
15-64	79.5	234	84.2	509	82.5	743

¹Relates to Global AIDS Monitoring indicator 1.1: People living with HIV who know their HIV status and PEPFAR Indicator DIABGNOSED_NAT.

²Relates to Global AIDS Monitoring indicator 1.2: People living with HIV on antiretroviral therapy and PEPFAR TX_CURR_NAT / SUBNAT.

³Relates to Global AIDS Monitoring indicator 1.4: People living with HIV who have suppressed viral loads and POEPFAR VL_SUPPRESSION_NAT.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 11.B Adult self-reported ART status or presence of laboratory antiretroviral (ARV) data: Conditional percentages

90-90-90 targets among people living with HIV aged 15-64 years by sex and age, NAIIS 2018

Age (years)	Diagnosed ¹					
	Males		Females		Total	
	Percentage who self-reported HIV-positive or with detectable ARVs ¹	Number	Percentage who self-reported HIV-positive or with detectable ARVs ¹	Number	Percentage who self-reported HIV-positive or with detectable ARVs ¹	Number
15-24	28.8	60	31.7	248	31.0	308
25-34	19.2	161	46.9	577	38.6	738
35-49	45.3	372	57.4	762	52.8	1,134
15-49	35.8	593	49.3	1,587	44.8	2,180
15-64	40.9	835	50.3	1,870	46.9	2,705
On Treatment, ² among those diagnosed						
Age (years)	Males		Females		Total	
	Percentage with detectable ARVs or who self-reported being on ART ²	Number	Percentage with detectable ARVs or who self-reported being on ART ²	Number	Percentage with detectable ARVs or who self-reported being on ART ²	Number
	*	14	91.3	83	92.3	97
15-24	*	14	91.3	83	92.3	97
25-34	96.5	34	95.7	288	95.9	322
35-49	98.2	187	95.2	442	96.2	629
15-49	97.7	235	94.9	813	95.7	1,048
15-64	97.8	382	95.8	984	96.4	1,366
Virally Suppressed, ³ among those on treatment						
Age (years)	Males		Females		Total	
	Percentage virally suppressed ³	Number	Percentage virally suppressed ³	Number	Percentage virally suppressed ³	Number
	*	13	78.4	77	77.1	90
15-24	*	13	78.4	77	77.1	90
25-34	65.8	33	76.9	277	75.2	310
35-49	77.4	183	84.4	424	82.0	607
15-49	75.2	229	81.3	778	79.6	1,007
15-64	79.2	373	81.7	949	80.9	1,322

¹Relates to [Global AIDS Monitoring indicator 1.1: People living with HIV who know their HIV status and PEPFAR Indicator DIABGNOSED_NAT](#).

²Relates to [Global AIDS Monitoring indicator 1.2: People living with HIV on antiretroviral therapy and PEPFAR TX_CURR_NAT / SUBNAT](#).

³Relates to [Global AIDS Monitoring indicator 1.4: People living with HIV who have suppressed viral loads and POEPFAR VL_SUPPRESSION_NAT](#).

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 11.C Adult self-reported ART status or presence of laboratory antiretroviral (ARV) data: Unconditional percentages

90-90-90 targets among people living with HIV aged 15-64 years by sex and age, NAIS 2018

Diagnosed ¹						
Age (years)	Males		Females		Total	
	Percentage who self-reported HIV-positive diagnosis or with detectable ARVs ¹	Number	Percentage who self-reported HIV-positive diagnosis or with detectable ARVs ¹	Number	Percentage who self-reported HIV-positive diagnosis or with detectable ARVs ¹	Number
15-24	28.8	60	31.7	248	31.0	308
25-34	19.2	161	46.9	577	38.6	738
35-49	45.3	372	57.4	762	52.8	1,134
15-49	35.8	593	49.3	1,587	44.8	2,180
15-64	40.9	835	50.3	1,870	46.9	2,705
On Treatment ²						
Age (years)	Males		Females		Total	
	Percentage with detectable ARVs or who self-reported being on ART ²	Number	Percentage with detectable ARVs or who self-reported being on ART ²	Number	Percentage with detectable ARVs or who self-reported being on ART ²	Number
15-24	27.5	60	29.0	248	28.6	308
25-34	18.5	161	44.9	577	37.0	738
35-49	44.5	372	54.6	762	50.8	1,134
15-49	35.0	593	46.8	1,587	42.9	2,180
15-64	40.0	835	48.2	1,870	45.3	2,705
Virally Suppressed ³						
Age (years)	Males		Females		Total	
	Percentage virally suppressed ³	Number	Percentage virally suppressed ³	Number	Percentage virally suppressed ³	Number
15-24	20.1	60	22.7	248	22.1	308
25-34	12.2	161	34.5	577	27.8	738
35-49	34.4	372	46.1	762	41.6	1,134
15-49	26.3	593	38.0	1,587	34.1	2,180
15-64	31.7	835	39.4	1,870	36.6	2,705

¹Relates to [Global AIDS Monitoring indicator 1.1: People living with HIV who know their HIV status and PEPFAR Indicator DIAGNOSED_NAT](#).

²Relates to [Global AIDS Monitoring indicator 1.2: People living with HIV on antiretroviral therapy and PEPFAR TX_CURR_NAT / SUBNAT](#).

³Relates to [Global AIDS Monitoring indicator 1.4: People living with HIV who have suppressed viral loads and PEPFAR VL_SUPPRESSION_NAT](#).

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

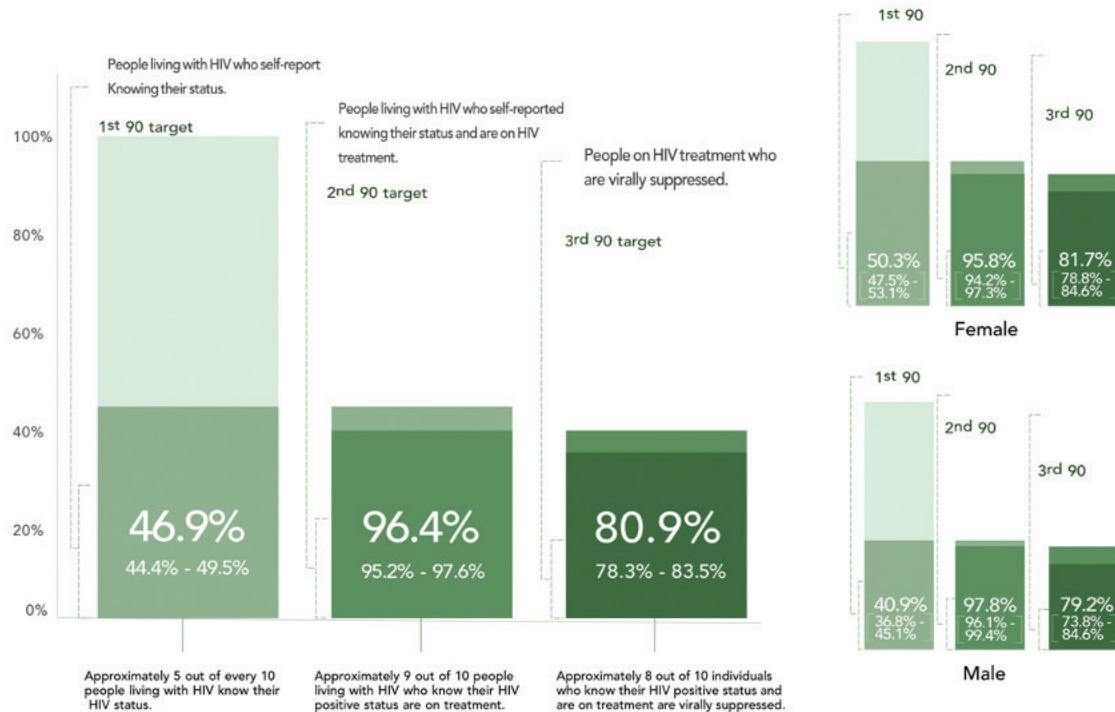


Figure 11.A Adult 90-90-90: Conditional percentages (adjusted for laboratory antiretroviral data among adults aged 15-64 years), NAIIS 2018

12. CLINICAL PERSPECTIVES ON PEOPLE LIVING WITH HIV

12.1 Background

Nigeria implemented the “test and treat” policy for all in 2016. Ensuring the treatment program is people-centered and innovative to meet this policy requires diligent monitoring and responsiveness.¹ Clinical indicators such as CD4 count at diagnosis and retention on ART can provide evidence of the ability to reach vulnerable populations and quality of care. The distribution of CD4 counts also reflects population health and the potential impact of HIV on mortality.

12.2 Results

Tables 12.A to 12.E and Figure 12.A present data on clinical characteristics of PLHIV from the survey.

12.2.1 Key Findings

- Among newly diagnosed HIV-positive adults aged 15-64 years who self-reported being HIV negative and had no detectable ARVs, 9.3% had a CD4 count <200 cells/ μ L and 29.5% had <350 cells/ μ L (Table 12.B).
- Among HIV-positive adults aged 15-64 years who self-reported being on ART \leq 12 months prior to the survey, 77.9% of women and 81.7% of men were virally suppressed (Table 12.E).
- Among HIV-positive adults aged 15-64 years who initiated ART \leq 12 months prior to the survey, 95.2% were still receiving ART (Table 12.C).
- Among HIV-positive adults aged 15-64 years who initiated ART $>$ 12 months prior to the survey, 94.3% were still receiving ART (Table 12.D).
- Among HIV-positive adults aged 15-64 years with VLS, 28.3% reported not being on ART (30.5% among women and 24.7% among men) (Table 12.E).

12.3 References

1. World Health Organization. *Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection*. Geneva: World Health Organization; 2016. <http://www.who.int/hiv/pub/arv/arv-2016/en/>. Accessed March 10, 2019.

Table 12.A Median CD4 count and prevalence of immunosuppression

Median (Q1, Q3) CD4 count of HIV-positive persons aged 15-64 years and percentage with immunosuppression (<500 cells/ μ L) by sex, self-reported diagnosis and antiretroviral therapy (ART) status and socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males			Females			Total		
	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number
Self-reported diagnosis and treatment status									
Not previously diagnosed	445 (297,663)	57.6	570	517 (325,751)	46.7	1,249	495 (312,716)	50.8	1,819
Previously diagnosed, not on ART	*	*	17	579 (282,747)	39.2	56	514 (282,717)	47.6	73
Previously diagnosed, on ART	441 (311,592)	58.6	231	606 (395,799)	36.9	503	541 (351,749)	44.6	734
Place of residence									
Urban	406 (279,632)	59.4	314	553 (339,754)	42.1	753	511 (306,711)	48.3	1,067
Rural	457 (313,646)	58.2	521	533 (339,775)	45.1	1,115	502 (327,739)	49.8	1,636
Geopolitical zone									
North West	412 (297,651)	58.2	55	556 (276,737)	41.4	117	514 (289,713)	47.5	172
North East	437 (292,612)	65.1	139	560 (279,780)	44.1	257	484 (289,702)	52.5	396
North Central	446 (293,649)	55.4	185	568 (386,825)	41.1	456	533 (335,771)	45.9	641
South East	420 (281,572)	60.2	148	518 (315,754)	47.8	325	479 (311,681)	52.5	473
South South	486 (312,678)	54.0	217	547 (361,771)	42.3	484	521 (337,745)	46.5	701
South West	406 (267,637)	63.9	91	516 (329,747)	46.4	229	480 (308,686)	52.5	320
Marital status									
Never married	437 (323,638)	56.7	161	555 (357,742)	43.3	307	516 (328,707)	48.6	468
Married or living together	437 (298,647)	59.3	595	538 (349,784)	42.9	995	501 (319,724)	50.0	1,590
Divorced or separated	481 (275,577)	57.2	44	508 (263,699)	48.6	197	491 (266,671)	50.6	241
Widowed	397 (236,551)	60.2	34	547 (338,757)	44.5	364	526 (325,752)	45.9	398

Table 12.A Median CD4 count and prevalence of immunosuppression (continued)

Median (Q1, Q3) CD4 count of HIV-positive persons aged 15-64 years and percentage with immunosuppression (<500 cells/ μ L) by sex, self-reported diagnosis and antiretroviral therapy (ART) status and socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males			Females			Total		
	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number
Type of union									
In polygynous union	430 (319,613)	62.2	90	537 (318,758)	43.2	300	507 (319,730)	48.2	390
Not in polygynous union	437 (289,646)	59.6	502	538 (353,800)	42.6	685	496 (318,727)	50.7	1,187
Not currently in union	443 (295,619)	57.2	239	543 (329,744)	44.9	868	516 (322,715)	48.1	1,107
Education²									
No education	488 (319,666)	53.1	76	565 (341,801)	43.5	367	533 (340,779)	45.4	443
Primary	433 (279,613)	65.2	198	512 (327,760)	46.8	512	485 (303,713)	52.6	710
Secondary	446 (305,662)	55.8	373	555 (357,754)	41.8	732	517 (328,711)	47.4	1,105
Tertiary	432 (325,609)	57.4	162	563 (345,784)	41.1	216	506 (328,702)	48.6	378
Others	*	*	26	339 (134,614)	69.4	36	336 (182,588)	72.5	62
Wealth quintile									
Lowest	456 (296,642)	58.1	100	546 (337,772)	44.8	207	504 (302,726)	49.7	307
Second	428 (303,588)	64.0	144	530 (316,793)	44.2	316	489 (316,714)	51.3	460
Middle	458 (270,654)	59.7	208	539 (327,765)	44.5	499	508 (311,738)	49.4	707
Fourth	426 (316,653)	57.2	203	548 (358,745)	42.6	495	511 (340,725)	47.6	698
Highest	433 (285,647)	56.6	180	539 (336,789)	43.6	351	510 (308,708)	48.9	531

Table 12.A Median CD4 count and prevalence of immunosuppression (continued)

Median (Q1, Q3) CD4 count of HIV-positive persons aged 15-64 years and percentage with immunosuppression (<500 cells/ μ L) by sex, self-reported diagnosis and antiretroviral therapy (ART) status and socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males			Females			Total		
	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number	Median (Q1, Q3) ¹	Percentage <500 cells/ μ L	Number
Age (years)									
15-19	*	*	23	640 (455,806)	31.4	57	639 (451,846)	29.5	80
20-24	493 (373,642)	51.5	36	617 (412,788)	34.3	193	582 (385,729)	38.0	229
25-29	455 (327,672)	56.4	72	514 (314,755)	48.6	279	494 (325,736)	50.8	351
30-34	453 (289,652)	60.0	92	527 (324,759)	44.5	302	505 (311,705)	49.4	394
35-39	434 (306,646)	59.5	115	517 (315,725)	47.0	353	490 (313,713)	51.0	468
40-44	443 (295,595)	60.4	129	589 (332,794)	41.2	244	511 (318,739)	49.0	373
45-49	403 (292,620)	63.8	126	506 (288,719)	47.3	160	443 (291,683)	54.8	286
50-54	437 (265,605)	56.9	113	538 (379,766)	44.5	144	493 (327,727)	50.8	257
55-59	328 (214,539)	71.3	63	611 (414,818)	35.2	74	506 (299,763)	49.7	137
60-64	475 (251,662)	52.7	66	432 (320,538)	63.1	62	439 (310,654)	58.1	128
Total 15-24 years	547 (385,692)	42.5	59	625 (423,804)	33.7	250	602 (392,771)	35.8	309
Total 15-49 years	446 (312,650)	58.3	593	546 (330,762)	43.7	1,588	513 (324,719)	48.5	2,181
Total 15-64 years	438 (299,640)	58.7	835	542 (339,768)	43.8	1,868	507 (320,723)	49.1	2,703

¹The interquartile range (IQR) is a measure of variability, based on dividing a data set into quartiles. Quartiles divide a rank-ordered data set into four equal parts. The values that divide each part are called the first, second and third quartiles, and they are denoted by Q1, Q2 and Q3, respectively.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

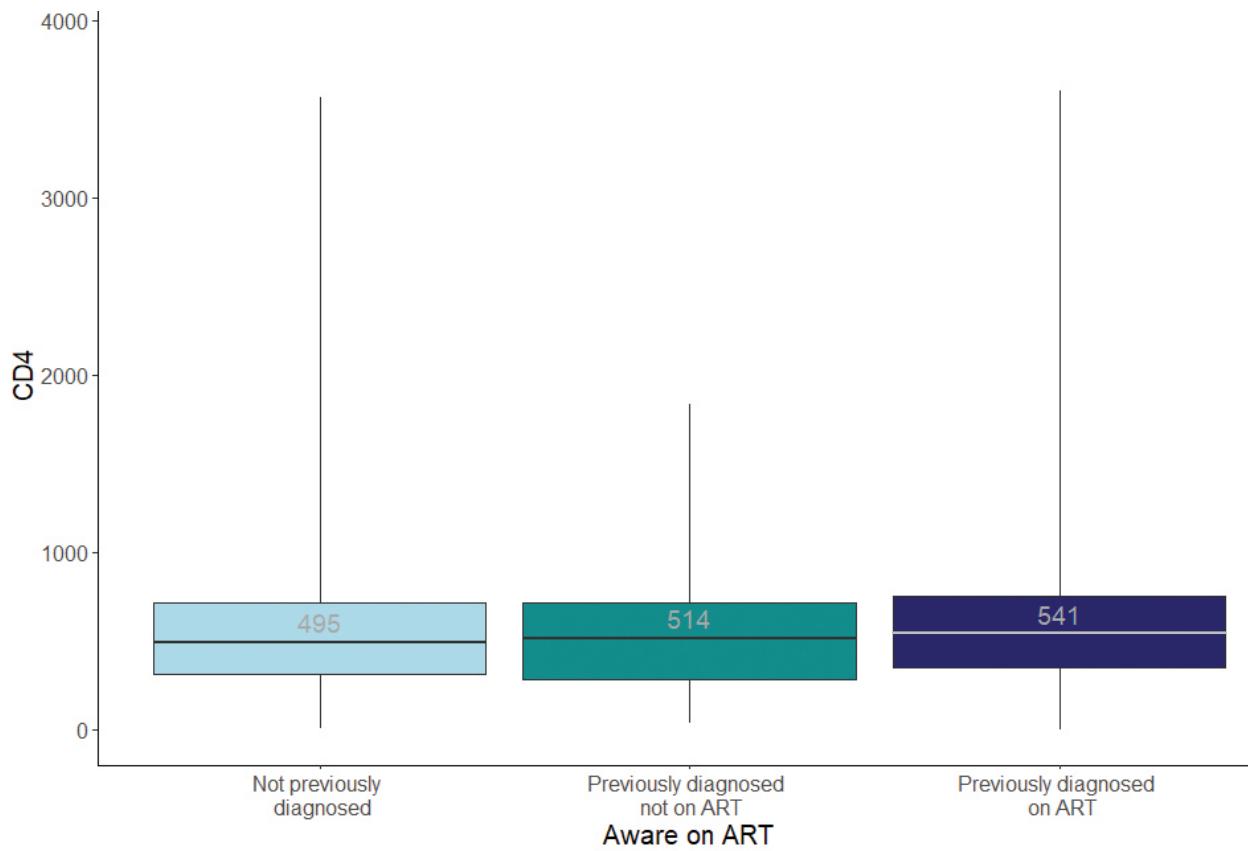


Figure 12.A CD4 count distribution among HIV-positive adults by antiretroviral therapy status (ART), NAIIS 2018

Table 12.B Late HIV diagnosis

Percentage distribution of persons aged 15-64 years who tested HIV positive in NAIIS but self-reported HIV negative, who had no detectable antiretrovirals and who had a CD4 cell count <200 cells/ μL^1 and < 50 cells/ μL by sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males			Females			Total		
	Percentage <200 cells/ μL^1	Percentage <350 cells/ μL^1	Number	Percentage <200 cells/ μL^1	Percentage <350 cells/ μL^1	Number	Percentage <200 cells/ μL^1	Percentage <350 cells/ μL^1	Number
Place of residence									
Urban	12.5	33.1	60	13.3	27.8	142	13.0	29.9	202
Rural	3.9	34.4	92	7.1	25.8	181	5.9	29.1	273
Geopolitical zone									
North West	*	*	7	*	*	9	*	*	16
North East	*	*	17	*	*	27	19.9	46.5	44
North Central	*	*	23	5.0	36.7	40	9.2	46.5	63
South East	6.1	34.0	40	4.8	28.2	92	5.3	30.2	132
South South	2.7	25.1	47	6.8	18.3	103	5.3	20.8	150
South West	*	*	18	16.2	26.7	52	14.0	26.2	70
Marital status									
Never married	8.2	23.0	44	3.7	19.4	68	5.7	21.0	112
Married or living together	5.6	39.3	92	9.3	25.8	180	7.8	31.3	272
Divorced or separated	*	*	9	*	*	29	22.1	32.0	38
Widowed	*	*	6	18.1	40.5	46	18.3	40.6	52
Type of union									
In polygynous union	*	*	15	16.7	39.8	39	13.7	41.7	54
Not in polygynous union	5.6	41.6	75	6.4	21.5	137	6.1	29.6	212
Not currently in union	11.9	25.4	59	10.9	27.9	143	11.3	27.1	202
Education²									
No education	*	*	2	*	*	24	*	*	26
Primary	4.8	32.4	33	6.1	32.9	77	5.6	32.7	110
Secondary	4.5	32.0	76	11.5	25.9	165	8.9	28.2	241
Tertiary	12.1	35.7	38	11.5	21.9	55	11.8	27.8	93
Others	*	*	3	*	*	1	*	*	4

Table 12.B Late HIV diagnosis (continued)

Percentage distribution of persons aged 15-64 years who tested HIV positive in NAIIS but self-reported HIV negative, who had no detectable antiretrovirals and who had a CD4 cell count <200 cells/ μL^1 and < 50 cells/ μL^1 by sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males			Females			Total		
	Percentage <200 cells/ μL^1	Percentage <350 cells/ μL^1	Number	Percentage <200 cells/ μL^1	Percentage <350 cells/ μL^1	Number	Percentage <200 cells/ μL^1	Percentage <350 cells/ μL^1	Number
Wealth quintile									
Lowest	*	*	8	*	*	20	*	*	28
Second	*	*	21	12.8	30.1	31	17.1	44.7	52
Middle	4.1	30.2	33	11.6	24.3	75	8.9	26.4	108
Fourth	7.7	29.7	37	7.6	27.9	98	7.6	28.5	135
Highest	6.3	28.4	53	10.6	25.9	99	8.8	26.9	152
Age (years)									
15-19	*	*	0	*	*	9	*	*	9
20-24	*	*	14	0.0	18.9	34	0.0	15.3	48
25-29	*	*	21	8.0	30.5	72	5.7	27.8	93
30-34	7.1	39.4	31	15.9	20.9	55	11.5	30.2	86
35-39	*	*	27	8.0	28.2	66	8.7	29.7	93
40-44	*	*	11	*	*	29	11.2	28.8	40
45-49	*	*	22	*	*	29	18.1	45.4	51
50-54	*	*	15	*	*	20	4.5	24.1	35
55-59	*	*	6	*	*	5	*	*	11
60-64	*	*	5	*	*	4	*	*	9
Total 15-24 years	*	*	14	0.0	16.2	43	0.0	13.9	57
Total 15-49 years	8.1	34.2	126	9.2	26.1	294	8.8	29.0	420
Total 15-64 years	8.0	33.8	152	10.0	26.8	323	9.3	29.5	475

¹Relates to Global AIDS Monitoring indicator 1.5: Late HIV diagnosis.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 12.C Retention on antiretroviral therapy (ART): People initiating ART ≤12 months prior to the survey

Percentage distribution of HIV-positive persons aged 15-64 years who self-reported still on ART after initiation ≤12 months prior to the survey by sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage still receiving ART ¹	Number	Percentage still receiving ART ¹	Number	Percentage still receiving ART ¹	Number
Presence of detectable ARVs²						
Detectable	*	11	*	22	97.4	33
Not detectable	*	6	*	15	*	21
Place of residence						
Urban	*	16	89.0	42	91.4	58
Rural	96.6	39	99.4	59	98.1	98
Geopolitical zone						
North West	*	3	*	5	*	8
North East	*	13	*	15	*	28
North Central	*	17	96.9	32	96.6	49
South East	*	8	*	13	*	21
South South	*	13	*	22	97.3	35
South West	*	1	*	14	*	15
Marital status						
Never married	*	9	*	15	*	24
Married or living together	97.3	37	91.5	48	94.1	85
Divorced or separated	*	7	*	16	*	23
Widowed	*	2	*	22	*	24
Type of union						
In polygynous union	*	5	*	16	*	21
Not in polygynous union	97.0	32	87.1	32	92.4	64
Not currently in union	*	18	96.6	53	96.5	71
Education³						
No education	*	6	*	15	*	21
Primary	*	9	*	28	95.2	37
Secondary	*	21	92.0	47	92.5	68
Tertiary	*	19	*	10	*	29
Others	*	0	*	0	*	0

Table 12.C Retention on antiretroviral therapy (ART): People initiating ART ≤12 months prior to the survey (continued)

Percentage distribution of HIV-positive persons aged 15-64 years who self-reported still on ART after initiation ≤12 months prior to the survey by sex and selected socio-demographic characteristics, NAIIS 2018

	Males		Females		Total
Wealth quintile					
Lowest	*	6	*	9	*
Second	*	10	*	15	*
Middle	*	18	*	27	92.6
Fourth	*	13	92.0	33	94.6
Highest	*	8	*	17	*
Age (years)					
15-19	*	0	*	2	*
20-24	*	4	*	10	*
25-29	*	2	*	18	*
30-34	*	3	*	13	*
35-39	*	12	*	21	97.6
40-44	*	6	*	13	*
45-49	*	12	*	13	*
50-54	*	8	*	9	*
55-59	*	6	*	2	*
60-64	*	2	*	0	*
Total 15-24 years	*	4	*	12	*
Total 15-49 years	97.6	39	93.4	90	94.8
Total 15-64 years	97.0	55	94.2	101	95.2
					156

¹Relates to Global AIDS Monitoring indicator 1.3: Retention on antiretroviral therapy at 12 months.

²Antiretroviral detection assay included only atazanavir, efavirenz and lopinavir. Participants who reported ART use or had an undetectable viral load but had no evidence of the first three ARVs were tested for nevirapine as well.

³Education categories refer to the highest level of education attended, whether that level was completed. An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 12.D Retention on antiretroviral therapy (ART): People initiating ART >12 months prior to the survey

Percentage distribution of HIV-positive persons aged 15-64 years who self-reported still on ART after initiation >12 months prior to the survey by sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage still receiving ART ¹	Number	Percentage still receiving ART ¹	Number	Percentage still receiving ART ¹	Number
					Percentage still receiving ART ¹	
Presence of detectable ARVs²						
Detectable	97.5	73	96.9	190	97.0	263
Not detectable	*	10	*	25	49.7	35
Place of residence						
Urban	98.2	74	92.4	213	94.2	287
Rural	94.4	107	94.2	210	94.3	317
Geopolitical zone						
North West	*	12	*	25	91.6	37
North East	*	28	100.0	64	100.0	92
North Central	97.0	74	99.1	146	98.3	220
South East	*	21	92.5	70	94.5	91
South South	89.8	31	83.6	65	85.9	96
South West	*	15	94.8	53	94.7	68
Marital status						
Never married	*	8	96.7	44	97.2	52
Married or living together	95.5	154	93.0	218	94.2	372
Divorced or separated	*	9	88.0	53	90.4	62
Widowed	*	10	94.5	108	95.1	118
Type of union						
In polygynous union	*	25	99.6	54	95.1	79
Not in polygynous union	97.2	128	90.5	161	93.9	289
Not currently in union	*	27	93.5	205	94.4	232
Education³						
No education	*	13	93.8	66	94.8	79
Primary	95.9	45	97.7	105	97.1	150
Secondary	96.9	62	93.2	174	94.3	236
Tertiary	94.4	56	94.5	67	94.4	123
Others	*	5	*	11	*	16

Table 12.D Retention on antiretroviral therapy (ART): People initiating ART >12 months prior to the survey (continued)

Percentage distribution of HIV-positive persons aged 15-64 years who self-reported still on ART after initiation >12 months prior to the survey by sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage still receiving ART ¹	Number	Percentage still receiving ART ¹	Number	Percentage still receiving ART ¹	Number
					Percentage still receiving ART ¹	
Wealth quintile						
Lowest	*	19	*	25	94.6	44
Second	93.0	38	98.0	81	96.2	119
Middle	95.6	44	91.3	105	92.6	149
Fourth	97.6	44	96.8	119	97.0	163
Highest	96.5	36	88.5	93	91.3	129
Age (years)						
15-19	*	0	*	6	*	6
20-24	*	0	*	19	*	19
25-29	*	5	86.9	38	89.0	43
30-34	*	10	89.4	62	88.8	72
35-39	*	19	94.3	95	94.3	114
40-44	100.0	36	91.3	76	94.6	112
45-49	97.7	33	97.2	45	97.4	78
50-54	96.1	37	100.0	47	97.9	84
55-59	*	17	*	20	100.0	37
60-64	*	24	*	15	92.6	39
Total 15-24 years	*	0	*	25	*	25
Total 15-49 years	96.8	103	91.8	341	93.1	444
Total 15-64 years	96.2	181	93.3	423	94.3	604

¹Relates to Global AIDS Monitoring indicator 1.3: Retention on antiretroviral therapy at 12 months.

²Antiretroviral detection assay included only atazanavir, efavirenz and lopinavir. Participants who reported ART use or had an undetectable viral load but had no evidence of the first three ARVs were tested for nevirapine as well.

³Education categories refer to the highest level of education attended, whether or not that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 12.E Viral load suppression by self-reported antiretroviral therapy (ART) status

Percentage distribution of HIV-positive persons aged 15-64 years with viral load suppression (VLS) (<1,000 copies/mL) by self-reported ART status and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristic	On ART > 12 months		On ART ≤ 12 months		Not on ART	
	With viral load suppression	Number ¹	With viral load suppression	Number ¹	With viral load suppression	Number ¹
Sex						
Male	79.2	176	81.7	52	24.7	555
Female	85.9	403	77.9	95	30.5	1,233
Residence						
Urban	84.3	277	83.0	52	29.7	665
Rural	82.8	302	76.9	95	27.3	1,123
Age (years)						
15-24	*	22	*	13	25.3	253
25-64	83.8	557	78.7	134	28.9	1,535
Total 15-64 years						
	83.6	579	79.4	147	28.3	1,788

¹Number of HIV-positive persons who had viral load values.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

13. PREVENTION OF MOTHER-TO-CHILD HIV TRANSMISSION

13.1 Background

PMTCT, also known as prevention of vertical transmission, refers to interventions to prevent transmission of HIV from an HIV-positive mother to her infant during pregnancy, labor, delivery or breastfeeding.¹

To prevent mother-to-child HIV transmission (MTCT), WHO recommends a comprehensive four-pronged approach: (1) primary prevention of HIV infection among women, especially young women; (2) prevention of unintended pregnancies among HIV-positive women; (3) provision of specific interventions to reduce HIV transmission from HIV-infected women to their infants; and (4) provision of treatment, care and support for HIV-positive mothers, their infants and family.^{2,3}

13.2 Results

Tables 13.A to 13.D present statistics on ANC attendance, breastfeeding practices, awareness of a woman's HIV status prior to or during pregnancy, use of ART during pregnancy in women who were aware of their HIV-positive status during pregnancy and infant HIV testing to confirm HIV infection through self-report by the mother and through biomarker testing during the survey.

13.2.1 Key Findings

- In the three years preceding the survey:
 - 76.3% of women aged 15-49 years who delivered in the three years preceding the survey attended at least one ANC visit, 87.1% in urban areas and 68.1% in rural areas (Table 13.A).
 - ANC attendance for women aged 15-49 years was lowest for those with no education (56.9%) and highest for those with tertiary education (97.6%) (Table 13.A).
 - ANC attendance was lowest among women aged 15-19 years (64.6%) and highest among women aged 35-39 years (80.6%) (Table 13.A).
 - 84.3% of those who knew their HIV-positive status received ARVs (Table 13.D).
- Among women aged 15-49 years who gave birth within the past 12 months, 41.5% reported knowing their status during their pregnancy (Table 13.C).

13.3 References

1. Joint United Nations Programme on HIV/AIDS (UNAIDS). Prevention of mother-to-child transmission of HIV (PMTCT). The Strengthening High Impact Interventions for an AIDS-free Generation (AIDSFree) Project. Accessed March 10, 2019.
2. De Cock KM, Fowler MG, Mercier E, et al. Prevention of mother-to-child HIV transmission in resource-poor countries: translating research into policy and practice. *JAMA*. 2000; 283:1175-1182. doi:10.1001/jama.283.9.1175.
3. World Health Organization. *Towards the elimination of mother-to-child transmission of HIV: Report of a WHO technical consultation*. Geneva: World Health Organization; 2011. http://apps.who.int/iris/bitstream/handle/10665/44638/9789241501910_eng.pdf;jsessionid=CD35DAE3C3D00349A9B149BCFF9262C4?sequence=1. Accessed March 10, 2019.

Table 13.A Antenatal care

Percentage of women aged 15-49 years who delivered in the three years preceding the survey and who attended at least one antenatal care (ANC) visit for their most recent birth by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Percentage who attended at least one ANC visit	Number
Place of residence		
Urban	87.1	9,181
Rural	68.1	14,420
Geopolitical zone		
North West	67.2	4,226
North East	71.2	4,924
North Central	72.4	3,764
South East	93.9	3,546
South South	74.6	3,271
South West	86.4	3,870
State		
Abia	93.9	707
Adamawa	76.1	732
Akwa Ibom	67.5	532
Anambra	95.2	615
Bauchi	69.7	1,169
Bayelsa	49.4	620
Benue	66.0	511
Borno	80.2	248
Cross River	83.8	604
Delta	79.1	492
Ebonyi	87.5	949
Edo	87.6	530
Ekiti	86.0	500
Enugu	94.6	624
FCT ¹	89.9	432
Gombe	79.2	1,015
Imo	96.0	651
Jigawa	78.9	868
Kaduna	71.7	661
Kano	82.4	734
Katsina	54.2	564
Kebbi	37.7	539
Kogi	77.6	428

Table 13.A Antenatal care (continued)

Percentage of women aged 15-49 years who delivered in the three years preceding the survey and who attended at least one antenatal care (ANC) visit for their most recent birth by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Percentage who attended at least one ANC visit	Number
Kwara	82.8	398
Lagos	88.3	1,041
Nasarawa	85.8	643
Niger	57.9	699
Ogun	89.2	548
Ondo	83.9	564
Osun	93.1	582
Oyo	78.4	635
Plateau	77.5	653
Rivers	71.9	493
Sokoto	47.0	537
Taraba	63.3	923
Yobe	57.9	837
Zamfara	44.5	323
Marital status		
Never married	72.1	1,166
Married or living together	76.5	21,641
Divorced or separated	77.2	547
Widowed	80.6	238
Type of union		
In polygynous union	68.4	6,098
Not in polygynous union	79.8	15,418
Not currently in union	74.4	1,951
Education²		
No education	56.9	6,352
Primary	78.1	4,068
Secondary	86.7	9,064
Tertiary	97.6	2,409
Others	66.0	1,677
Wealth quintile		
Lowest	55.3	5,066
Second	67.1	4,852
Middle	81.4	5,011
Fourth	88.1	4,704
Highest	93.6	3,968

Table 13.A Antenatal care (continued)

Percentage of women aged 15-49 years who delivered in the three years preceding the survey and who attended at least one antenatal care (ANC) visit for their most recent birth by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Percentage who attended at least one ANC visit	Number
Age (years)		
15-19	64.6	1,682
20-24	74.2	5,309
25-29	78.2	6,929
30-34	78.4	5,171
35-39	80.6	3,132
40-44	80.3	1,120
45-49	69.3	258
Total 15-24 years	71.7	6,991
Total 15-49 years	76.3	23,601

¹FCT – Federal Capital Territory.

²Education categories refer to the highest level of education attended, whether that level was completed.

Table 13.B Breastfeeding status by child's age and mother's HIV status				
Percent distribution of last-born children born to women aged 15-49 years in the three years preceding the survey by breastfeeding status, child's age and mother's HIV status, NAIIS 2018				
Characteristic	Never breastfed	Ever breastfed, but not currently breastfeeding	Currently breastfeeding	Number
Child's age (months)				
0-1	0.9	52.4	46.7	1,395
2-3	2.1	55.4	42.5	1,423
4-5	1.2	59.0	39.8	1,378
6-8	1.0	59.1	39.8	2,062
9-11	0.9	57.9	41.2	1,852
12-17	1.0	71.7	27.2	4,108
18-23	1.0	90.5	8.4	2,930
24-36	0.7	97.0	2.2	5,486
Mother's NAIIS HIV test result				
HIV positive	2.2	77.4	20.4	311
HIV negative	1.0	73.3	25.7	21,357
Not tested	1.4	71.6	27.1	1,689

Table 13.C Prevention of mother-to-child HIV (PMTCT) transmission: Knowledge of HIV status					
Percentage distribution of women aged 15-49 years who gave birth within the past 12 months who were tested for HIV during antenatal care and received their results or who already knew they were HIV positive by selected socio-demographic characteristics, NAIIS 2018					
Socio-demographic characteristics	Tested for HIV and received result ¹			Total percentage with known HIV status ¹	Number of women who gave birth within the past 12 months
	Percentage who tested HIV positive	Percentage who tested HIV negative	Percentage who already knew they tested HIV positive		
Place of residence					
Urban	0.0	57.0	0.7	57.7	3,193
Rural	0.1	29.3	0.4	29.8	5,169
Geopolitical zone					
North West	0.0	27.0	0.2	27.3	1,468
North East	0.0	28.2	0.3	28.5	1,730
North Central	0.0	44.5	0.5	45.1	1,321
South East	0.1	65.1	0.6	65.8	1,393
South South	0.3	44.8	0.6	45.7	1,235
South West	0.1	51.7	0.9	52.7	1,215
Marital status					
Never married	0.0	33.9	1.5	35.4	410
Married or living together	0.1	41.5	0.4	42.0	7,746
Divorced or separated	0.0	36.1	1.3	37.4	147
Widowed	0.0	42.4	0.9	43.3	57
Type of union					
In polygynous union	0.0	27.8	0.2	27.9	2,073
Not in polygynous union	0.1	46.5	0.5	47.1	5,629
Not currently in union	0.0	35.1	1.4	36.5	614
Education²					
No education	0.0	19.0	0.1	19.2	2,162
Primary	0.0	36.7	0.6	37.3	1,359
Secondary	0.2	52.4	0.6	53.2	3,371
Tertiary	0.0	80.5	1.3	81.8	885
Others	0.0	18.7	0.0	18.7	576

Table 13.C Prevention of mother-to-child HIV (PMTCT) transmission: Knowledge of HIV status (continued)

Percentage distribution of women aged 15-49 years who gave birth within the past 12 months who were tested for HIV during antenatal care and received their results or who already knew they were HIV positive by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Tested for HIV and received result ¹		Percentage who already knew they tested HIV positive	Total percentage with known HIV status ¹	Number of women who gave birth within the past 12 months
	Percentage who tested HIV positive	Percentage who tested HIV negative			
Wealth quintile					
Lowest	0.0	16.5	0.1	16.7	1,796
Second	0.0	25.9	0.3	26.1	1,716
Middle	0.1	41.9	0.2	42.1	1,806
Fourth	0.2	52.8	0.9	53.9	1,660
Highest	0.1	74.0	1.1	75.3	1,384
Age (years)					
15-19	0.0	26.8	0.0	26.8	753
20-24	0.0	35.5	0.2	35.8	1,986
25-29	0.1	44.3	0.5	45.0	2,536
30-34	0.1	47.0	0.7	47.7	1,770
35-39	0.2	48.1	0.8	49.1	977
40-44	0.0	46.2	1.5	47.7	280
45-49	0.0	30.9	2.1	33.0	60
Total 15-24 years	0.0	32.9	0.1	33.1	2,739
Total 15-49 years	0.1	41.0	0.5	41.5	8,362

¹Relates to PEPFAR PMTCT_STAT_NAT / SUBNAT.

²Education categories refer to the highest level of education attended, whether that level was completed.

Table 13.D Prevention of mother-to-child HIV transmission: HIV-positive pregnant women who received antiretrovirals (ARVs)

Percent distribution of women aged 15-49 years who gave birth within the past three years and received antiretrovirals (ARVs) during pregnancy by HIV result and selected socio-demographic characteristics, NAIIS 2018

HIV result and socio-demographic characteristics	Percentage who were already on ARVs prior to pregnancy	Percentage who were newly initiated on ARVs during pregnancy or labor and delivery	Total percentage who received ARVs ¹	Number of HIV-positive women who gave birth within the past three years
NAIIS HIV test result				
HIV positive	73.7	22.5	96.2	87
HIV negative	*	*	*	29
Not tested	*	*	*	12
Place of residence				
Urban	71.0	9.0	80.0	63
Rural	67.5	22.4	89.9	65
Geopolitical zone				
North West	*	*	*	11
North East	*	*	*	21
North Central	*	*	*	29
South East	*	*	*	25
South South	*	*	*	20
South West	*	*	*	22
Marital status				
Never married	*	*	*	10
Married or living together	74.4	16.0	90.4	102
Divorced or separated	*	*	*	13
Widowed	*	*	*	3
Type of union				
In polygynous union	*	*	*	16
Not in polygynous union	73.8	16.3	90.1	86
Not currently in union	*	*	*	26
Education²				
No education	*	*	*	15
Primary	*	*	*	24
Secondary	68.0	22.6	90.6	57
Tertiary	*	*	*	29
Others	*	*	*	3

Table 13.D Prevention of mother-to-child HIV transmission: HIV-positive pregnant women who received antiretrovirals (ARVs) (continued)

Percent distribution of women aged 15-49 years who gave birth within the past three years and received antiretrovirals (ARVs) during pregnancy by HIV result and selected socio-demographic characteristics, NAIIS 2018

HIV result and socio-demographic characteristics	Percentage who were already on ARVs prior to pregnancy	Percentage who were newly initiated on ARVs during pregnancy or labor and delivery	Total percentage who received ARVs ¹	Number of HIV-positive women who gave birth within the past three years
Wealth quintile				
Lowest	*	*	*	12
Second	*	*	*	15
Middle	73.6	8.6	82.2	32
Fourth	68.5	15.3	83.8	31
Highest	69.0	18.4	87.4	38
Age (years)				
15-19	*	*	*	1
20-24	*	*	*	12
25-29	71.7	13.0	84.7	32
30-34	78.9	11.4	90.3	34
35-39	75.9	15.5	91.4	36
40-44	*	*	*	12
45-49	*	*	*	1
Total 15-24 years	*	*	*	13
Total 15-49 years	69.5	14.8	84.3	128

¹Relates to Global AIDS Monitoring indicator 2.3: Preventing the mother-to-child transmission of HIV and PEPFAR PMTCT_ARV_NAT / SUBNAT.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

14. ADOLESCENTS AND YOUNG PEOPLE

14.1 Background

A third of the sub-Saharan Africa population is made up of individuals between the ages of 10 and 24 years.¹ Young people aged 15-24 years are more likely to engage in risky sexual behaviors than older adults and less likely to visit health care facilities. Control of HIV in this population is particularly challenging but critical for long-term epidemic control.¹

14.2 Results

Table 14.A shows the prevalence of early sexual debut before 15 years among young persons aged 15-24 years. Tables 14.B to 14.D show knowledge of HIV prevention among adolescents aged 10-14 years. These knowledge data were measured by asking participants to agree or disagree with both accurate and inaccurate statements about HIV prevention.

14.2.1 Key Findings

- Among young people aged 15-24 years, 18.1% reported sexual debut before the age of 15 years (Table 14.A).
- Among young women aged 15-24 years, sexual debut before age 15 years was 24.2% in rural areas compared to 13.8% in urban areas (Table 14.A).
- Comprehensive knowledge of HIV prevention among adolescents aged 10-14 years was 1.4% (girls 1.2%, boys 1.7%) (Table 14.B, Table 14.C, Table 14.D).

14.3 References

1. Hervish A, Clifton D. *The Status Report on Adolescents and Young People in Sub-Saharan Africa: Opportunities and Challenges*. Johannesburg and Washington, DC: Population Reference Bureau; 2012.

Table 14.A Age at sexual debut												
Socio-demographic characteristics	Males				Females				Total			
	Percent-age who had sex before age of 15 years	Percent-age who had sex between age of 15 and 19 years	Percent-age who had sex between age of 20 and 24 years	Number	Percent-age who had sex before age of 15 years	Percent-age who had sex between age of 15 and 19 years	Percent-age who had sex between age of 20 and 24 years	Number	Percent-age who had sex before age of 15 years	Percent-age who had sex between age of 15 and 19 years	Percent-age who had sex between age of 20 and 24 years	Number
Place of residence												
Urban	15.9	65.0	19.1	3,457	13.8	69.8	16.4	6,533	14.7	67.8	17.5	9,990
Rural	13.9	67.6	18.4	5,088	24.2	69.2	6.6	11,963	20.7	68.7	10.7	17,051
Geopolitical zone												
North West	7.7	63.9	28.3	656	29.1	66.8	4.1	3,872	25.1	66.3	8.6	4,528
North East	10.7	63.7	25.6	1,040	24.7	70.4	4.9	3,876	21.2	68.7	10.1	4,916
North Central	11.1	68.0	21.0	1,837	14.9	72.6	12.5	3,307	13.3	70.7	16.0	5,144
South East	18.6	63.6	17.7	1,378	11.8	69.0	19.2	2,348	15.0	66.5	18.5	3,726
South South	17.9	70.7	11.5	2,020	15.9	73.8	10.3	2,898	16.8	72.3	10.9	4,918
South West	17.2	65.6	17.1	1,614	9.2	67.7	23.1	2,195	13.4	66.6	20.0	3,809
Marital status												
Never married	17.6	66.3	16.1	6,543	15.2	68.6	16.3	5,948	16.6	67.2	16.2	12,491
Married or living together	5.9	66.6	27.6	1,898	22.2	69.9	7.9	11,953	19.4	69.3	11.2	13,851
Divorced or separated	11.0	70.3	18.7	80	22.6	69.9	7.4	505	20.7	70.0	9.3	585
Widowed	*	*	*	8	18.4	68.9	12.7	69	18.4	69.6	12.1	77
Type of union												
In polygynous union	9.4	69.7	20.9	88	29.0	66.9	4.1	3,464	28.3	67.0	4.7	3,552
Not in polygynous union	5.7	66.4	27.9	1,796	19.1	71.2	9.7	8,427	16.2	70.2	13.7	10,223
Not currently in union	17.5	66.4	16.1	6,631	15.8	68.7	15.5	6,522	16.8	67.3	15.9	13,153

Table 14.A Age at sexual debut (continued)

Percentage of older adolescents and young adults aged 15-24 years who have had vaginal sex by age at sexual debut, sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males			Females			Total			Number		
	Percent-age who had sex before age of 15 years	Percent-age who had sex between age of 15 and 19 years	Percent-age who had sex between age of 20 and 24 years	Number	Percent-age who had sex before age of 15 years	Percent-age who had sex between age of 15 and 19 years	Number	Percent-age who had sex before age of 15 years	Percent-age who had sex between age of 15 and 19 years			
Education¹												
No education	9.5	70.6	19.9	547	30.9	66.3	2.7	4,605	28.1	66.9	5.0	5,152
Primary	14.2	63.1	22.7	648	23.1	72.0	4.9	2,375	20.8	69.7	9.5	3,023
Secondary	17.2	67.3	15.5	5,691	12.3	73.9	13.8	8,625	14.6	70.8	14.6	14,316
Tertiary	10.2	62.3	27.5	1,343	3.8	56.4	39.8	1,500	7.3	59.7	33.0	2,843
Others	5.2	66.9	27.9	315	34.3	64.8	0.9	1,370	28.8	65.2	6.0	1,685
Wealth quintile												
Lowest	9.5	70.9	19.6	1,173	31.5	65.3	3.2	4,248	26.0	66.7	7.3	5,421
Second	11.4	65.5	23.0	1,486	25.1	69.9	5.0	4,095	21.1	68.6	10.2	5,581
Middle	16.3	64.7	19.0	1,959	16.9	74.1	9.1	4,051	16.6	70.6	12.8	6,010
Fourth	17.8	66.0	16.2	2,049	12.0	71.9	16.1	3,608	14.5	69.3	16.2	5,657
Highest	15.8	66.3	17.9	1,878	9.0	65.9	25.1	2,494	12.5	66.1	21.4	4,372
Age (years)												
15-19	27.1	72.9	NA	2,577	28.3	71.7	NA	6,088	27.9	72.1	NA	8,665
20-24	10.3	64.0	25.7	5,968	15.7	68.3	16.0	12,408	13.5	66.6	19.9	18,376
Total 15-24 years												
	14.9	66.4	18.7	8,545	20.1	69.5	10.5	18,496	18.1	68.3	13.5	27,041

¹Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

NA – not applicable.

Table 14.B Adolescent knowledge about HIV prevention: Adolescent boys

Percentage distribution of adolescent boys aged 10-14 years who correctly identify both ways of preventing the transmission of HIV and reject major misconceptions about HIV transmission by selected socio-demographic characteristics, NAIIS 2018

Socio-demo-graphic characteristics	Percentage who correctly answered the questions:											
	Can a person reduce their chance of getting HIV by not having sex?	Number	Can a person reduce the risk of getting HIV by using a condom every time they have sex?	Number	Can a healthy-looking person have HIV?	Number	Can ARVs make people with HIV less likely to spread the virus?	Number	Can a mother with HIV or AIDS pass HIV to her unborn baby?	Number	All five questions	Number ¹
Place of residence												
Urban	13.5	1,532	8.4	2,387	11.8	1,532	8.3	1,532	14.9	1,532	2.7	2,388
Rural	5.6	2,251	3.6	2,982	4.2	2,251	3.0	2,251	4.5	2,251	0.8	2,982
Geopolitical zone												
North West	3.3	1,161	2.4	1,452	2.7	1,161	1.6	1,161	2.6	1,161	0.9	1,453
North East	2.1	743	1.6	848	1.3	743	1.1	743	1.5	743	0.5	848
North Central	5.1	642	3.8	785	4.4	642	2.6	642	4.6	642	1.3	785
South East	20.5	353	7.9	668	18.4	353	13.5	353	22.1	353	2.6	668
South South	25.3	380	12.7	734	19.5	380	15.5	380	22.0	380	2.9	734
South West	17.7	504	10.0	882	15.2	504	10.3	504	21.2	504	2.8	882
Education²												
No education	0.3	420	0.3	438	0.4	420	0.0	420	0.2	420	0.0	438
Primary	3.1	2,203	1.9	3,056	1.9	2,203	1.7	2,203	2.9	2,203	0.4	3,056
Secondary	27.3	982	15.1	1,678	24.1	982	16.3	982	27.6	982	4.7	1,679
Tertiary	*	1	*	1	*	1	*	1	*	1	*	1
Wealth quintile												
Lowest	2.0	924	1.5	1,038	1.3	924	0.8	924	0.8	924	0.1	1,038
Second	3.8	883	2.5	1,080	2.6	883	2.1	883	2.8	883	0.7	1,080
Middle	6.2	818	3.8	1,175	4.8	818	2.6	818	4.7	818	0.8	1,176
Fourth	12.1	681	7.0	1,113	10.4	681	8.8	681	13.1	681	2.6	1,113
Highest	30.4	477	14.6	963	26.9	477	17.9	477	35.2	477	4.3	963

Table 14.B Adolescent knowledge about HIV prevention: Adolescent boys (continued)

Percentage distribution of adolescent boys aged 10-14 years who correctly identify both ways of preventing the transmission of HIV and reject major misconceptions about HIV transmission by selected socio-demographic characteristics, NAIIS 2018

Socio-demo-graphic characteristics	Percentage who correctly answered the questions:											
	Can a person reduce their chance of getting HIV by not having sex?	Number	Can a person reduce the risk of getting HIV by using a condom every time they have sex?	Number	Can a healthy-looking person have HIV?	Number	Can ARVs make people with HIV less likely to spread the virus?	Number	Can a mother with HIV or AIDS pass HIV to her unborn baby?	Number	All five questions	Number ¹
Total 10-14 years	8.9	3,783	5.8	5,369	7.4	3,783	5.2	3,783	8.8	3,783	1.7	5,370

¹Includes only participants who answered all five questions.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 14.C Adolescent knowledge about HIV prevention: Adolescent girls

Percentage distribution of adolescent girls aged 10-14 years who correctly identify both ways of preventing the transmission of HIV and reject major misconceptions about HIV transmission by selected socio-demographic characteristics, NAIIS 2018

Socio-demo-graphic characteristics	Percentage who correctly answered the questions:											
	Can a person reduce their chance of getting HIV by not having sex?	Number	Can a person reduce the risk of getting HIV by using a condom every time they have sex?	Number	Can a healthy-looking person have HIV?	Number	Can ARVs make people with HIV less likely to spread the virus?	Number	Can a mother with HIV or AIDS pass HIV to her unborn baby?	Number	All five questions	Number ¹
Place of residence												
Urban	13.2	1,397	5.9	2,379	12.6	1,397	6.9	1,396	13.7	1,396	1.8	2,379
Rural	3.9	2,118	2.6	2,880	3.9	2,118	3.0	2,118	4.3	2,118	0.7	2,880
Geopolitical zone												
North West	1.6	1,172	1.0	1,494	1.4	1,172	0.7	1,172	1.3	1,172	0.4	1,494
North East	0.9	690	0.8	828	0.9	690	0.7	690	0.8	690	0.3	828
North Central	3.3	595	2.6	741	3.5	595	2.3	595	3.6	595	1.0	741
South East	23.2	253	6.6	626	22.7	253	15.1	253	24.2	253	2.6	626
South South	19.4	354	7.6	742	18.6	354	14.1	354	20.8	354	1.8	742
South West	22.9	451	9.5	828	22.1	451	11.5	450	25.1	450	2.3	828
Education²												
No education	0.3	564	0.3	604	0.3	564	0.3	564	0.3	564	0.3	604
Primary	2.7	1,941	1.4	2,782	2.2	1,941	1.7	1,940	2.3	1,940	0.4	2,782
Secondary	24.9	874	10.3	1,725	25.1	874	14.3	874	27.4	874	2.8	1,725
Tertiary	*	0	*	1	*	0	*	0	*	0	*	1
Wealth quintile												
Lowest	0.6	895	0.5	1,026	0.6	895	0.5	895	0.7	895	0.2	1,026
Second	2.0	802	1.5	1,000	1.8	802	1.9	802	2.4	802	0.5	1,000
Middle	5.1	758	2.9	1,123	5.1	758	3.4	757	4.7	757	0.8	1,123
Fourth	11.8	629	5.3	1,131	11.8	629	7.2	629	12.8	629	2.0	1,131
Highest	30.1	431	10.3	979	28.7	431	15.5	431	32.1	431	2.5	979
Total 10-14 years												
	7.8	3,515	4.1	5,259	7.6	3,515	4.6	3,514	8.2	3,514	1.2	5,259

¹Includes only participants who answered all five questions.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table 14.D Adolescent knowledge about HIV prevention: Total¹

Percentage distribution of adolescents aged 10-14 years who correctly identify both ways of preventing the transmission of HIV and reject major misconceptions about HIV transmission by selected socio-demographic characteristics, NAIIS 2018

Socio-demo-graphic characteristics	Percentage who correctly answered the questions:											
	Can a person reduce their chance of getting HIV by not having sex?	Number	Can a person reduce the risk of getting HIV by using a condom every time they have sex?	Number	Can a healthy-looking person have HIV?	Number	Can ARVs make people with HIV less likely to spread the virus?	Number	Can a mother with HIV or AIDS pass HIV to her unborn baby?	Number	All five questions	Number ¹
Place of residence												
Urban	13.3	2,929	7.2	4,766	12.2	2,929	7.6	2,928	14.3	2,929	2.3	4,767
Rural	4.8	4,369	3.1	5,862	4.0	4,369	3.0	4,369	4.4	4,369	0.7	5,862
Geopolitical zone												
North West	2.4	2,333	1.7	2,946	2.1	2,333	1.2	2,333	2.0	2,333	0.6	2,947
North East	1.6	1,433	1.2	1,676	1.1	1,433	0.9	1,433	1.2	1,433	0.4	1,676
North Central	4.3	1,237	3.2	1,526	4.0	1,237	2.4	1,237	4.1	1,237	1.1	1,526
South East	21.6	606	7.3	1,294	20.2	606	14.2	606	22.9	606	2.6	1,294
South South	22.5	734	10.2	1,476	19.0	734	14.8	734	21.5	734	2.3	1,476
South West	20.1	955	9.8	1,710	18.4	955	10.9	954	23.0	955	2.6	1,710
Education²												
No education	0.3	984	0.3	1,042	0.4	984	0.2	984	0.3	984	0.2	1,042
Primary	2.9	4,144	1.6	5,838	2.0	4,144	1.7	4,143	2.6	4,144	0.4	5,838
Secondary	26.2	1,856	12.7	3,403	24.6	1,856	15.4	1,856	27.5	1,856	3.8	3,404
Tertiary	*	1	*	2	*	1	*	1	*	1	*	2
Wealth quintile												
Lowest	1.3	1,819	1.0	2,064	1.0	1,819	0.7	1,819	0.7	1,819	0.1	2,064
Second	3.0	1,685	2.0	2,080	2.2	1,685	2.0	1,685	2.6	1,685	0.6	2,080
Middle	5.7	1,576	3.3	2,298	5.0	1,576	3.0	1,575	4.7	1,576	0.8	2,299
Fourth	12.0	1,310	6.2	2,244	11.1	1,310	8.1	1,310	13.0	1,310	2.3	2,244
Highest	30.3	908	12.5	1,942	27.7	908	16.8	908	33.7	908	3.4	1,942
Total 10-14 years	8.4	7,298	5.0	10,628	7.5	7,298	4.9	7,297	8.5	7,298	1.4	10,629

¹Includes only participants who answered all five questions.

²Education categories refer to the highest level of education attended, whether that level was completed.

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

15. HIV RISK FACTORS

15.1 Background

During NAIIS, participants were asked questions about high-risk behaviors, including early sexual debut, recent engagement with multiple sexual partners, condom use at last sexual intercourse, recent engagement in paid sexual intercourse and condom use at last sexual intercourse with a non-marital, non-cohabitating partner. With this information, programs can focus resources to reach individuals most at risk for HIV infection and individuals most in need of information.

In 2007, WHO and UNAIDS recommended voluntary medical male circumcision as a cost-effective strategy to reduce the spread of HIV. Therefore, men aged 15-64 years were asked if they had been medically or traditionally circumcised.

15.2 Results

Tables 15.A to 15.E illustrate NAIIS data about HIV risk factors.

15.2.1 Key Findings

- Among men aged 15-64 years, HIV prevalence was 1.5% among those with no condom use during sex with a non-marital, non-cohabiting partner compared to 0.9% among those who used condoms with a non-marital, non-cohabiting partner (Table 15.A).
- Among married men who had sex with a non-marital, non-cohabiting partner in the past 12 months, 34.3% reported using a condom the last time they had sex compared to 17.3% of married women (Table 15.B, Table 15.C).
- Among men aged 15-64 years, 28.0% self-reported medical circumcision status, 56.8% reported non-medical circumcision status and 1.8% reported being uncircumcised (Table 15.E).

Table 15.A HIV prevalence by sexual behavior

Prevalence of HIV among persons aged 15-64 years who ever had vaginal sex by sex and sexual behavior characteristics, NAIIS 2018

Sexual behavior characteristics	Males		Females		Total	
	Percentage HIV positive	Number	Percentage HIV positive	Number	Percentage HIV positive	Number
Age (years) at first sexual intercourse						
<15	0.9	3,151	1.5	10,746	1.3	13,897
15-19	1.4	19,158	2.0	44,801	1.8	63,959
20-24	1.1	19,099	2.4	17,176	1.6	36,275
≥25	1.4	12,487	2.0	5,103	1.5	17,590
Number of sexual partners in the past 12 months						
0	1.7	12,229	3.5	17,630	2.7	29,859
1	1.2	31,406	1.6	62,241	1.4	93,647
≥2	1.2	14,430	3.6	2,964	1.6	17,394
Condom use at last sexual intercourse in the past 12 months						
Used condom	1.2	6,150	4.1	4,104	2.2	10,254
Did not use condom	1.2	39,775	1.5	60,559	1.4	100,334
Condom use at last sex with a non-marital, non-cohabitating partner						
Used condom	0.9	5,632	4.0	2,366	1.7	7,998
Did not use condom	1.5	8,770	3.4	6,881	2.2	15,651
No sexual intercourse with a non-marital, non-cohabitating partner in the past 12 months	1.1	31,553	1.4	55,997	1.3	87,550
Total 15-24 years	0.4	8,451	1.1	17,805	0.9	26,256
Total 15-49 years	1.2	45,445	2.0	69,769	1.6	115,214
Total 15-64 years	1.3	58,326	2.0	83,055	1.7	141,381

Table 15.B Condom use at last sex with a non-marital, non-cohabitating partner: Men

Percentage distribution of men aged 15-64 years who reported having sex in the past 12 months who also reported having a non-marital, non-cohabiting partner in the past 12 months and among those who reported having sex with a non-marital, non-cohabiting partner in the past 12 months, the percentage distribution who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Among men who reported having sex in the past 12 months		Among men who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	
	Percentage who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	Number	Percentage who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner ¹	Number
Place of residence				
Urban	39.3	19,939	42.2	7,301
Rural	28.3	28,776	36.6	7,826
Geopolitical zone				
North West	5.5	8,674	37.6	361
North East	11.6	7,148	32.7	886
North Central	30.3	9,287	44.9	2,756
South East	49.1	7,216	45.7	3,065
South South	58.2	8,090	36.2	4,437
South West	49.5	8,300	38.6	3,622
Marital status				
Never married	95.0	10,507	42.5	9,942
Married or living together	11.8	37,220	34.3	4,353
Divorced or separated	86.1	720	30.8	614
Widowed	82.9	229	19.8	190
Type of union				
In polygynous union	6.1	6,897	19.1	440
Not in polygynous union	13.0	30,266	35.7	3,896
Not currently in union	94.3	11,456	41.6	10,746
Education²				
No education	8.4	5,499	25.5	435
Primary	18.8	9,181	24.9	1,677
Secondary	48.1	19,109	39.7	8,687
Tertiary	43.3	10,440	47.1	4,210
Others	2.7	4,451	7.7	114

Table 15.B Condom use at last sex with a non-marital, non-cohabitating partner: Men (continued)

Percentage distribution of men aged 15-64 years who reported having sex in the past 12 months who also reported having a non-marital, non-cohabiting partner in the past 12 months and among those who reported having sex with a non-marital, non-cohabiting partner in the past 12 months, the percentage distribution who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Among men who reported having sex in the past 12 months		Among men who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	
	Percentage who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	Number	Percentage who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner ¹	Number
			Percentage who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	
Wealth quintile				
Lowest	8.7	9,025	25.6	814
Second	17.8	9,001	32.3	1,737
Middle	34.6	9,911	35.5	3,355
Fourth	44.9	10,464	40.4	4,382
Highest	51.0	10,314	44.7	4,839
Age (years)				
15-19	89.5	1,866	40.4	1,692
20-24	72.1	4,889	43.1	3,523
25-29	48.2	7,221	41.8	3,523
30-34	33.3	7,175	41.2	2,293
35-39	21.0	7,062	37.2	1,484
40-44	16.6	5,639	35.5	938
45-49	13.6	4,741	33.5	627
50-54	11.5	4,071	21.1	467
55-59	9.5	2,964	24.3	294
60-64	10.1	3,087	10.9	286
Total 15-24 years	76.4	6,755	42.4	5,215
Total 15-49 years	37.9	38,593	40.8	14,080
Total 15-64 years	33.5	48,715	39.7	15,127

¹Relates to Global AIDS Monitoring indicator 3.18: Condom use at last high-risk sex.

²Education categories refer to the highest level of education attended, whether that level was completed.

Table 15.C Condom use at last sex with a non-marital, non-cohabitating partner: Women

Percentage distribution of women aged 15-64 years who reported having sex in the past 12 months who also reported having a non-marital, non-cohabitating partner in the past 12 months and among those who reported having sex with a non-marital, non-cohabitating partner in the past 12 months, the percentage distribution who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Among women who reported having sex in the past 12 months		Among women who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	
	Percentage who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	Number	Percentage who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner ¹	Number
Place of residence				
Urban	17.4	28,520	29.1	4,862
Rural	11.2	41,523	22.7	4,840
Geopolitical zone				
North West	2.8	14,316	16.5	339
North East	4.4	12,134	17.0	613
North Central	9.1	12,255	34.3	1,176
South East	27.5	9,750	30.9	2,408
South South	30.5	10,415	23.6	2,998
South West	22.1	11,173	27.0	2,168
Marital status				
Never married	76.8	8,119	31.8	6,347
Married or living together	2.3	59,011	17.3	1,330
Divorced or separated	77.9	1,471	14.7	1,137
Widowed	62.1	1,397	14.4	859
Type of union				
In polygynous union	2.1	20,086	9.6	404
Not in polygynous union	2.3	38,593	20.6	882
Not currently in union	75.2	10,987	27.8	8,343
Education²				
No education	3.0	20,312	3.3	599
Primary	9.1	13,512	13.8	1,239
Secondary	25.1	23,182	28.5	5,566
Tertiary	28.1	8,177	34.7	2,217
Others	1.9	4,781	0.9	76

Table 15.C Condom use at last sex with a non-marital, non-cohabitating partner: Women (continued)

Percentage distribution of women aged 15-64 years who reported having sex in the past 12 months who also reported having a non-marital, non-cohabitating partner in the past 12 months and among those who reported having sex with a non-marital, non-cohabitating partner in the past 12 months, the percentage distribution who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Among women who reported having sex in the past 12 months		Among women who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	
	Percentage who reported having sex with a non-marital, non-cohabiting partner in the past 12 months	Number	Percentage who reported using a condom the last time they had sex with a non-marital, non-cohabiting partner ¹	Number
Wealth quintile				
Lowest	3.7	14,306	12.4	614
Second	7.5	14,040	19.6	1,194
Middle	14.9	14,154	22.7	2,205
Fourth	20.8	14,302	27.2	2,811
Highest	23.0	13,241	31.9	2,878
Age (years)				
15-19	34.8	5,378	33.6	2,094
20-24	23.2	11,429	30.9	2,791
25-29	12.9	13,664	26.6	1,806
30-34	8.4	11,489	21.0	946
35-39	7.7	9,601	19.6	735
40-44	7.0	7,231	11.5	520
45-49	8.2	4,691	14.4	362
50-54	7.1	3,706	8.4	255
55-59	7.0	1,647	2.6	104
60-64	8.2	1,207	6.1	89
Total 15-24 years	27.1	16,807	32.1	4,885
Total 15-49 years	14.7	63,483	27.3	9,254
Total 15-64 years	14.0	70,043	26.3	9,702

¹Relates to Global AIDS Monitoring indicator 3.18: Condom use at last high-risk sex.

²Education categories refer to the highest level of education attended, whether that level was completed.

Table 15.D Condom use at last sex with a non-marital, non-cohabitating partner: Total

Percentage distribution of adults aged 15-64 years who reported having sex in the past 12 months who also reported having a non-marital, non-cohabitating partner in the past 12 months and among those who reported having sex with a non-marital, non-cohabitating partner in the past 12 months, the percentage distribution who reported using a condom the last time they had sex with a non-marital, non-cohabitating partner by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Among adults who reported having sex in the past 12 months		Among adults who reported having sex with a non-marital, non-cohabitating partner in the past 12 months	
	Percentage who reported having sex with a non-marital, non-cohabitating partner in the past 12 months	Number	Percentage who reported using a condom the last time they had sex with a non-marital, non-cohabitating partner ¹	Number
Place of residence				
Urban	27.7	48,459	37.9	12,163
Rural	18.9	70,299	32.1	12,666
Geopolitical zone				
North West	3.9	22,990	28.6	700
North East	7.3	19,282	27.1	1,499
North Central	19.3	21,542	42.3	3,932
South East	38.2	16,966	40.3	5,473
South South	44.3	18,505	31.9	7,435
South West	36.0	19,473	35.1	5,790
Marital status				
Never married	88.3	18,626	39.1	16,289
Married or living together	6.4	96,231	30.8	5,683
Divorced or separated	81.0	2,191	21.1	1,751
Widowed	65.4	1,626	15.5	1,049
Type of union				
In polygynous union	3.2	26,983	14.7	844
Not in polygynous union	7.5	68,859	33.4	4,778
Not currently in union	86.4	22,443	36.6	19,089
Education²				
No education	4.3	25,811	13.7	1,034
Primary	13.5	22,693	20.8	2,916
Secondary	37.1	42,291	36.1	14,253
Tertiary	37.5	18,617	43.6	6,427
Others	2.3	9,232	4.7	190

Table 15.D Condom use at last sex with a non-marital, non-cohabitating partner: Total (continued)

Percentage distribution of adults aged 15-64 years who reported having sex in the past 12 months who also reported having a non-marital, non-cohabitating partner in the past 12 months and among those who reported having sex with a non-marital, non-cohabitating partner in the past 12 months, the percentage distribution who reported using a condom the last time they had sex with a non-marital, non-cohabitating partner by selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Among adults who reported having sex in the past 12 months		Among adults who reported having sex with a non-marital, non-cohabitating partner in the past 12 months	
	Percentage who reported having sex with a non-marital, non-cohabitating partner in the past 12 months	Number	Percentage who reported using a condom the last time they had sex with a non-marital, non-cohabitating partner ¹	Number
			Number	
Wealth quintile				
Lowest	5.8	23,331	20.8	1,428
Second	12.0	23,041	27.8	2,931
Middle	23.9	24,065	31.2	5,560
Fourth	32.4	24,766	36.0	7,193
Highest	37.3	23,555	40.9	7,717
Age (years)				
15-19	49.6	7,244	36.9	3,786
20-24	41.2	16,318	38.8	6,314
25-29	28.1	20,885	37.9	5,329
30-34	20.1	18,664	36.8	3,239
35-39	14.3	16,663	32.4	2,219
40-44	11.8	12,870	28.4	1,458
45-49	11.0	9,432	26.9	989
50-54	9.6	7,777	17.0	722
55-59	8.5	4,611	17.5	398
60-64	9.5	4,294	9.7	375
Total 15-24 years	43.8	23,562	38.2	10,100
Total 15-49 years	25.0	102,076	36.4	23,334
Total 15-64 years	23.0	118,758	35.3	24,829

¹Relates to Global AIDS Monitoring indicator 3.18: Condom use at last high-risk sex.

²Education categories refer to the highest level of education attended, whether that level was completed.

Table 15.E Male circumcision

Percent distribution of males aged 15-64 years by self-reported circumcision status, by NAIIS HIV test result and selected socio-demographic characteristics, NAIIS 2018

HIV status and socio-demographic characteristics	Circumcised ¹						Number
	Medical circumcision	Non-medical circumcision	Method not known	Uncircumcised	Unknown		
NAIIS HIV test result							
HIV positive	31.0	53.7	13.3	1.1	0.8	845	
HIV negative	27.8	57.1	12.1	1.7	1.2	77,125	
Not tested	29.2	53.0	13.5	2.3	1.9	5,370	
Place of residence							
Urban	33.8	46.4	16.6	1.6	1.7	34,635	
Rural	22.6	66.5	8.1	1.9	0.9	48,705	
Geopolitical zone							
North West	8.6	87.6	0.7	2.6	0.5	15,094	
North East	13.9	83.2	0.5	1.9	0.4	15,563	
North Central	29.2	62.4	5.8	1.7	0.9	16,916	
South East	63.2	20.0	15.0	0.6	1.1	11,354	
South South	38.6	41.9	16.7	1.4	1.5	12,025	
South West	37.4	22.4	35.6	1.5	3.1	12,388	
Marital status							
Never married	35.0	48.2	13.2	2.0	1.7	34,157	
Married or living together	21.6	64.8	11.1	1.6	0.9	47,079	
Divorced or separated	27.7	53.1	16.6	1.9	0.6	1,346	
Widowed	24.7	57.3	15.6	1.7	0.7	619	
Type of union							
In polygynous union	8.5	83.2	5.2	2.4	0.8	8,611	
Not in polygynous union	24.3	61.0	12.5	1.4	0.8	38,139	
Not currently in union	34.6	48.4	13.3	2.0	1.6	36,122	
Education²							
No education	7.3	80.4	4.6	6.5	1.3	9,878	
Primary	19.7	66.8	10.6	1.7	1.2	14,588	
Secondary	35.2	47.0	15.2	1.1	1.6	36,387	
Tertiary	40.1	42.4	15.5	1.1	0.9	15,976	
Others	3.3	94.1	1.1	1.1	0.5	6,443	
Wealth quintile							
Lowest	7.4	86.0	2.7	3.2	0.7	15,831	
Second	15.7	75.6	5.5	2.2	1.1	16,154	
Middle	26.8	60.6	10.1	1.5	1.0	17,529	
Fourth	36.6	44.3	16.6	1.1	1.4	17,573	
Highest	47.5	26.3	23.0	1.2	2.0	16,253	

Table 15.E Male circumcision (continued)

Percent distribution of males aged 15-64 years by self-reported circumcision status, by NAIIS HIV test result and selected socio-demographic characteristics, NAIIS 2018

HIV status and socio-demographic characteristics	Circumcised ¹						Number
	Medical circumcision	Non-medical circumcision	Method not known	Uncircumcised	Unknown		
Age (years)							
15-19	33.3	51.3	11.2	2.0	2.2	14,323	
20-24	31.0	54.3	11.9	1.5	1.3	11,111	
25-29	29.8	55.7	11.8	1.6	1.1	11,322	
30-34	30.0	55.0	12.0	2.0	1.0	9,680	
35-39	27.8	55.9	13.4	1.9	0.9	9,187	
40-44	23.3	60.2	14.0	1.6	1.0	7,380	
45-49	22.9	61.8	12.8	1.4	1.0	6,166	
50-54	18.2	66.0	12.8	2.1	0.9	5,432	
55-59	17.7	67.9	11.5	2.0	0.9	4,011	
60-64	15.0	70.9	12.0	1.4	0.7	4,728	
Total 15-24 years	32.3	52.6	11.5	1.8	1.8	25,434	
Total 15-49 years	29.5	55.3	12.2	1.8	1.3	69,169	
Total 15-64 years	28.0	56.8	12.2	1.8	1.3	83,340	

¹Relates to Global AIDS Monitoring indicator 3.16: Prevalence of male circumcision and PEPFAR VMMC TOTALCIRC NAT / SUBNAT.

²Education categories refer to the highest level of education attended, whether that level was completed.

16. HBV AND HCV SCREENING AND TB SERVICES

16.1 Background

PLHIV are at risk for acquiring other infections, including tuberculosis (TB), hepatitis B virus (HBV) and hepatitis C virus (HCV). TB is the leading cause of death for PLHIV in Africa. HIV infection predisposes a person to TB infection and progression to active disease. Information regarding health seeking behavior, particularly for TB health services, is therefore very important.

HIV, HBV and HCV have similar transmission routes and concurrent infection with HIV and either HBV or HCV often results in more rapid progression of HBV or HCV to cirrhosis and higher liver-disease mortality. NAIIS 2018 provides population-based HBV and HCV prevalence among HIV-positive individuals aged 15-64 years and a subset of HIV-negative individuals, which supports actionable policy recommendations for screening and treatment. This chapter describes the prevalence of HBV and HCV in persons aged 15 to 64, by sex, age, socio-demographic characteristics and HIV status.

16.2 Results

Tables 16.A to 16.C report NAIIS findings on co-infections associated with HIV.

16.2.1 Key Findings

- The overall prevalence of HBV infection among adults aged 15-64 years was 8.1% (10.3% in men and 5.8% in women). HBV prevalence peaked at ages 35-39 years (10.2%) and was lowest at ages 55-59 years (2.5%) (Table 16.A).
- The overall prevalence of HCV infection among individuals aged 15-64 years was 1.1% (1.3% in men and 1.0% in women). HCV prevalence peaked at ages 50-54 years (3.3%) and was lowest at ages 15-19 years (0.4%) (Table 16.B).
- The prevalence of HBV infection among HIV-positive adults aged 15-64 years was 8.9% (Table 16.A).
- The prevalence of HCV among HIV-positive adults aged 15-64 years was 1.1% (Table 16.B).
- Among adults found to be HIV-positive during NAIIS 2018, 9.9% had ever visited a clinic for TB evaluation.

Table 16.A Hepatitis B virus (HBV) infection prevalence by sex and demographic characteristics: Persons aged 15-64 years

Prevalence of hepatitis B surface antigen (HBsAg+) among persons aged 15-64 years by HIV status, sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage HBsAg positive ¹	Number	Percentage HBsAg positive ¹	Number	Percentage HBsAg positive ¹	Number
NAIIS HIV test result						
HIV positive	13.3	843	6.5	1,891	8.9	2,734
HIV negative	10.3	3,551	5.7	4,153	8.1	7,704
Place of residence						
Urban	9.8	1,812	5.5	2,640	7.6	4,452
Rural	10.8	2,582	6.0	3,404	8.5	5,986
Marital status						
Never married	10.8	1,410	5.2	1,085	8.8	2,495
Married or living together	10.0	2,785	5.6	3,893	7.7	6,678
Divorced or separated	6.2	128	8.4	352	7.8	480
Widowed	1.7	67	7.6	706	7.2	773
Education²						
No education	9.0	488	6.5	1,532	7.2	2,020
Primary	9.8	863	5.7	1,329	7.7	2,192
Secondary	10.1	1,828	5.9	2,194	8.2	4,022
Tertiary	11.6	821	3.7	675	8.6	1,496
Others	11.8	390	5.9	308	9.3	698
Wealth quintile						
Lowest	12.0	859	7.7	1,010	10.0	1,869
Second	10.7	860	6.2	1,149	8.5	2,009
Middle	10.5	911	6.0	1,414	8.2	2,325
Fourth	11.0	939	4.9	1,352	8.1	2,291
Highest	7.4	825	4.4	1,119	5.9	1,944
Pregnancy status						
Currently pregnant	NA	NA	5.9	435	NA	NA
Not currently pregnant	NA	NA	5.8	5,526	NA	NA
Number of pregnancies						
0	NA	NA	5.2	950	NA	NA
1	NA	NA	6.6	667	NA	NA
2-5	NA	NA	6.4	2,922	NA	NA
>5	NA	NA	4.9	1,478	NA	NA

Table 16.A Hepatitis B virus (HBV) infection prevalence by sex and demographic characteristics: Persons aged 15-64 years (continued)

Prevalence of hepatitis B surface antigen (HBsAg+) among persons aged 15-64 years by HIV status, sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage HBsAg positive ¹	Number	Percentage HBsAg positive ¹	Number	Percentage HBsAg positive ¹	Number
Male circumcision						
Circumcised	10.2	4,279	NA	NA	NA	NA
Not circumcised	11.4	77	NA	NA	NA	NA
Number of sexual partners in the past 12 months						
0	10.7	1,438	5.8	1,842	8.5	3,280
1	10.8	2,035	5.8	3,930	7.7	5,965
≥2	8.3	862	5.4	244	7.9	1,106
Age (years)						
15-19	10.3	443	5.4	604	7.9	1,047
20-24	10.7	464	6.4	815	8.6	1,279
25-29	13.7	605	5.1	988	9.5	1,593
30-34	11.2	591	7.6	857	9.5	1,448
35-39	13.1	561	7.2	825	10.2	1,386
40-44	9.2	485	6.3	633	7.7	1,118
45-49	7.7	405	4.1	406	5.9	811
50-54	6.1	344	6.6	405	6.3	749
55-59	3.9	229	1.1	227	2.5	456
60-64	5.2	267	2.5	284	3.8	551
Total 15-24 years	10.5	907	5.9	1,419	8.2	2,326
Total 15-49 years	11.1	3,554	6.1	5,128	8.6	8,682
Total 15-64 years	10.3	4,394	5.8	6,044	8.1	10,438

¹The numerator for HBV prevalence is the number of persons who tested positive for HBV. The denominator for HBV prevalence is the number of people who were tested for HBV.

²Education categories refer to the highest level of education attended, whether that level was completed.

NA – not applicable.

Table 16.B Hepatitis C virus (HCV) infection prevalence by demographic characteristics: Persons aged 15-64 years

Prevalence of hepatitis C (HCV RNA+) among persons aged 15-64 years by HIV status, sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage HCV RNA positive ¹	Number	Percentage HCV RNA positive ¹	Number	Percentage HCV RNA positive ¹	Number
NAIIS HIV test result						
HIV positive	0.8	843	1.2	1,891	1.1	2,734
HIV negative	1.3	3,552	1.0	4,153	1.1	7,705
Place of residence						
Urban	0.7	1,813	0.1	2,640	0.4	4,453
Rural	1.8	2,582	1.8	3,404	1.8	5,986
Marital status						
Never married	0.4	1,411	0.3	1,085	0.4	2,496
Married or living together	1.9	2,785	1.2	3,893	1.6	6,678
Divorced or separated	1.5	128	0.6	352	0.9	480
Widowed	3.6	67	1.6	706	1.8	773
Education²						
No education	3.1	488	2.3	1,532	2.5	2,020
Primary	2.0	863	1.7	1,329	1.8	2,192
Secondary	1.1	1,829	0.2	2,194	0.7	4,023
Tertiary	0.6	821	0.2	675	0.4	1,496
Others	0.2	390	0.3	308	0.2	698
Wealth quintile						
Lowest	2.3	859	1.5	1,010	1.9	1,869
Second	1.6	860	2.3	1,149	2.0	2,009
Middle	1.8	911	1.0	1,414	1.4	2,325
Fourth	0.7	940	0.3	1,352	0.5	2,292
Highest	0.0	825	0.2	1,119	0.1	1,944
Pregnancy status						
Currently pregnant	NA	NA	0.6	435	NA	NA
Not currently pregnant	NA	NA	1.0	5,526	NA	NA
Number of pregnancies						
0	NA	NA	0.3	950	NA	NA
1	NA	NA	0.2	667	NA	NA
2-5	NA	NA	1.4	2,922	NA	NA
>5	NA	NA	1.4	1,478	NA	NA

Table 16.B Hepatitis C virus (HCV) infection prevalence by demographic characteristics: Persons aged 15-64 years (continued)

Prevalence of hepatitis C (HCV RNA+) among persons aged 15-64 years by HIV status, sex and selected socio-demographic characteristics, NAIIS 2018

Socio-demographic characteristics	Males		Females		Total	
	Percentage HCV RNA positive ¹	Number	Percentage HCV RNA positive ¹	Number	Percentage HCV RNA positive ¹	Number
Male circumcision						
Circumcised	1.2	4,280	NA	NA	NA	NA
Not circumcised	2.4	77	NA	NA	NA	NA
Number of sexual partners in the past 12 months						
0	0.8	1,439	0.9	1,842	0.9	3,281
1	1.6	2,035	1.1	3,930	1.3	5,965
≥2	1.4	862	0.4	244	1.3	1,106
Age (years)						
15-19	0.5	443	0.3	604	0.4	1,047
20-24	0.6	465	0.4	815	0.5	1,280
25-29	0.9	605	0.7	988	0.8	1,593
30-34	1.3	591	1.7	857	1.5	1,448
35-39	1.5	561	1.2	825	1.3	1,386
40-44	1.6	485	0.1	633	0.8	1,118
45-49	1.9	405	2.1	406	2.0	811
50-54	3.1	344	3.5	405	3.3	749
55-59	3.2	229	0.7	227	2.0	456
60-64	2.4	267	2.6	284	2.5	551
Total 15-24 years	0.5	908	0.3	1,419	0.4	2,327
Total 15-49 years	1.0	3,555	0.8	5,128	0.9	8,683
Total 15-64 years	1.3	4,395	1.0	6,044	1.1	10,439

¹The numerator for HCV prevalence is the number of persons who tested positive for hepatitis C (HCV RNA+). The denominator for HCV prevalence is the number of people who were tested for HCV.

²Education categories refer to the highest level of education attended, whether that level was completed.

NA – not applicable.

Table 16.C**Clinic attendance for tuberculosis (TB) evaluation and services: Total**

Percent of respondents aged 15-64 years who self-reported ever visiting a clinic for tuberculosis (TB), diagnosed with TB and treated for TB by HIV status and selected socio-demographic characteristics, NAIIS 2018

HIV status and socio-demographic characteristics	Percentage who ever visited a clinic for TB evaluation	Number	Among those who had ever visited a clinic for TB evaluation		Among those who were diagnosed with TB	
			Percentage who were diagnosed with TB	Number	Percentage who were treated for TB	Number
NAIIS HIV test result						
HIV positive	9.9	2,714	40.4	281	98.8	114
HIV negative	1.7	169,175	26.1	2,769	89.7	746
Not tested	2.5	12,523	18.9	303	84.8	58
Place of residence						
Urban	2.3	77,899	23.7	1,752	89.1	429
Rural	1.5	106,513	30.2	1,601	91.6	489
Geopolitical zone						
North West	1.8	32,334	24.8	470	85.2	121
North East	1.5	31,524	26.8	500	89.8	142
North Central	1.4	35,986	31.4	628	91.6	187
South East	2.6	28,616	24.5	689	94.3	178
South South	1.9	27,112	27.7	529	89.3	148
South West	2.1	28,840	26.1	537	93.0	142
Marital status						
Never married	1.5	57,997	25.5	835	84.0	219
Married or living together	2.0	113,139	26.1	2,141	93.1	573
Divorced or separated	3.3	4,592	32.8	156	88.9	54
Widowed	2.7	8,459	30.4	215	93.3	71
Type of union						
In polygynous union	1.6	31,208	25.2	474	94.3	136
Not in polygynous union	2.1	81,163	26.4	1,654	92.8	434
Not currently in union	1.7	71,048	26.9	1,206	86.1	344
Education¹						
No education	1.0	36,801	28.7	357	93.4	113
Primary	1.9	34,369	31.0	624	92.9	209
Secondary	1.7	73,485	27.8	1,219	90.8	333
Tertiary	3.6	27,679	20.0	992	90.3	212
Others	1.5	11,915	31.4	158	76.3	51

Table 16.C Clinic attendance for tuberculosis (TB) evaluation and services: Total (continued)

Percent of respondents aged 15-64 years who self-reported ever visiting a clinic for tuberculosis (TB), diagnosed with TB and treated for TB by HIV status and selected socio-demographic characteristics, NAIIS 2018

HIV status and socio-demographic characteristics	Percentage who ever visited a clinic for TB evaluation	Number	Among those who had ever visited a clinic for TB evaluation		Among those who were diagnosed with TB	
			Percentage who were diagnosed with TB	Number	Percentage who were treated for TB	Number
Wealth quintile						
Lowest	1.2	33,633	31.3	362	91.9	126
Second	1.3	35,674	29.5	450	87.6	127
Middle	1.8	39,357	26.1	694	90.2	204
Fourth	2.1	39,585	27.0	850	91.7	233
Highest	2.7	36,163	23.1	997	89.6	228
Age (years)						
15-19	1.0	30,578	21.5	278	78.8	60
20-24	1.3	25,989	22.5	316	85.5	68
25-29	1.8	27,068	22.4	432	88.1	101
30-34	2.0	22,723	24.4	407	85.7	93
35-39	2.3	20,470	30.1	458	93.9	126
40-44	2.2	16,487	33.6	344	89.5	123
45-49	2.8	12,782	31.7	344	96.5	112
50-54	2.5	11,697	24.1	272	94.1	79
55-59	3.3	7,613	24.9	243	97.7	72
60-64	3.0	9,005	31.2	259	94.9	84
Total 15-24 years	1.2	56,567	22.0	594	82.4	128
Total 15-49 years	1.7	156,097	26.4	2,579	89.0	683
Total 15-64 years	1.9	184,412	26.3	3,353	90.3	918

¹Education categories refer to the highest level of education attended, whether that level was completed.

APPENDIX A SAMPLE DESIGN METHODOLOGY

Appendix A provides a high-level overview of NAIIS sampling and weighting procedures. In-depth details are provided in the Sampling and Weighting Document, which may be found on the [NAIIS project website](#).

A.1 Sample Design

Overview

The NAIIS sample design was a stratified multistage probability sample design, with strata defined by the 37 states of the country. First-stage primary sampling units were defined as EAs created for the 2006 census. Second-stage sampling units were defined as households within EAs and, finally, eligible persons within households. Within each state, EAs were selected with probabilities proportionate to the 2018 projected number of households in the EA based on the 2006 census. The allocation of the sample EAs to the 37 states was designed to achieve specified precision levels for (1) a national estimate of HIV incidence and (2) state-level estimates of HIV prevalence and viral load suppression (VLS). The second-stage sampling units were selected from lists of dwelling units/households compiled by trained staff for each of the sampled EAs. Upon completion of the listing process, a random systematic sample of 28 dwelling units/households was selected from each EA, except for Lagos where eight dwelling units/households were selected from each EA. Within the sampled households, all eligible adults aged 15-64 years were included in the study sample for data collection. All eligible children aged 0-14 years in a subsample of the sampled households were included in the study for data collection.

Population of Inference

The population of inference for NAIIS was comprised of the *de facto* household population. The *de facto* population was comprised of individuals who were present in households, i.e., slept in the household, on the night prior to the household interview. In contrast, the *de jure* population is comprised of individuals who are usual residents of the household, irrespective of whether they slept in the household on the night prior to the household interview.

Precision Specifications and Assumptions

The following specifications were used to develop the sample design for NAIIS.

- The relative standard error of the national estimate of HIV incidence among persons aged 15-64 was set at ~30%.
- The 95% confidence intervals were used for the estimated VLS rate among HIV-positive persons aged 15-64 in each of the 37 strata (states) calculated at ~10%.

The following assumptions were used to develop the sample design for NAIIS:

- An overall HIV prevalence rate of 3.4% that varied by state.
- An annual HIV incidence rate for adults aged 15-64 of 0.49%.
- A MDRI of 130 days, yielding an annualization rate of $365/130 = 2.8077$. Hence, the estimated HIV incidence rate for MDRI = 130 days was $Pm = 0.0060/2.8077 = 0.0021$ (0.21%).
- The VLS rate among HIV-positive adults aged 15-49 in each state h of $Pvh = 50\%$. This was a conservative assumption because it overstated the actual variance of the VLS rate.
- An intra-cluster correlation (ICC) of 0.02 for both prevalence and incidence. The ICC provided an average measure of the homogeneity of responses within the first-stage sampling units.

- An occupancy rate of 100% was used for sampled dwelling units. Note that this was not included in the calculation of the overall survey response rate but does determine the initial numbers of dwelling units to be sampled.
- An overall household response rate of 90.6% was witnessed among the occupied dwelling units.¹
- The average number of persons aged 15-64 in a household was 2.47.¹
- The percentage of persons in households who were aged 0-14 was 45.7%.¹
- The percentage of persons in households who were aged 15-64 was 48.2%.¹
- Among individuals aged 15-64 in eligible responding households, the biomarker response rate was 77.3%. This corresponded to an overall biomarker response rate of 63%. This was a conservative estimate derived from response rates in the 2012 National HIV & AIDS and Reproductive Health Survey (NARHS 2012).¹
- Among children aged 0-14 in eligible responding households, the biomarker response rate was 63%.

¹The assumed values of response rates and number of participating persons per household were based on data from the [2013-14 Nigeria Demographic and Health Survey \(DHS\)](#) and [NARHS 2012](#).

Selection of the Primary Sampling Units (PSUs)

The sampling frame consisted of 662,855 EAs containing 28,900,478 households and 140,431,798 persons. A stratified sample of 4,035 EAs was selected from the sampling frame. The 37 strata specified for sampling were the 37 states of Nigeria. The EA samples were selected systematically and with probabilities proportionate to a measure of size (MOS) equal to the 2018 projected number of households in the EA based on the 2006 census. Prior to selection, the EAs were sorted by type of EA, including urban/rural and other geographic variables in the frame. The sorting of the EAs prior to sample selection induces an implicit geographic stratification. To select the sample from an individual stratum, the cumulative MOS was determined for each EA in the ordered list of EAs and the sample selections were designated using a sampling interval equal to the total MOS of the EAs in the stratum divided by the number of EAs to be selected and a random starting point. The resulting sample has the property that the probability of selecting an EA within an individual stratum is proportional to the MOS of the EA in the stratum.

Selection of Households

For both sampling and analysis purposes, a household is defined to be a group of individuals who reside in a physical structure such as a house, apartment, compound or homestead and share in housekeeping arrangements. The physical structure in which people reside is referred to as the dwelling unit, which may contain more than one household meeting the above definition. Households are eligible for participation in the study if they are located within the sampled EA.

The selection of households for NAIIS involved the following steps: (1) listing the dwelling units/households within the sampled EAs; (2) assigning eligibility codes to the listed dwelling unit/household records; (3) selecting the samples of dwelling units/households; and (4) designating a subsample of households for data collection for children.

A description of the household listing process as well as a summary of household eligibility may be found in the Sampling and Weighting Document. Twenty-eight households were sampled from each cluster in all states except for Lagos state, where eight households were sampled per cluster.

Selection of Individuals

The selection of individuals for NAIIS involved the following steps: (1) compiling a list of all individuals

known to reside in the household or who slept in the household during the night prior to data collection; (2) identifying those rostered individuals who were eligible for data collection; and (3) selecting for the study those individuals meeting the age and residency requirements of the study. However, only those individuals who slept in the household the night before the household interview, i.e., the *de facto* population, were retained for subsequent weighting and analysis.

A.2 Weighting

Overview

In general, the purpose of weighting survey data from a complex sample design is to (1) compensate for variable probabilities of selection, (2) account for differential nonresponse rates within relevant subsets of the sample and (3) adjust for possible under-coverage of certain population groups. Weighting is accomplished by assigning an appropriate sampling weight to each responding sampled unit (e.g., a household or person) and using that weight to calculate weighted estimates from the sample. The critical component of the sampling weight is the base weight that is defined to be the reciprocal of the probability of including a household or person in the sample. The base weights are used to inflate the responses of the sampled units to population levels and are generally unbiased (or consistent) if there is no nonresponse or noncoverage in the sample. When nonresponse or noncoverage occurs in the survey, weighting adjustments are applied to the base weights to compensate for both types of sample omissions.

Nonresponse is unavoidable in virtually all surveys of human populations. For NAIIS, nonresponse could occur at different stages of data collection, including (1) before the enumeration of individuals in the household, (2) after household enumeration and selection of persons but before completion of the individual interview and (3) after completion of the interview but before collection of a viable blood sample.

Noncoverage could arise when some members of the survey population have no chance of being selected for the sample. For example, noncoverage could occur if the field operations fail to enumerate all dwelling units during the listing process or if certain household members are omitted from the household rosters. To compensate for such omissions, the post-stratification procedures are used to calibrate the weighted sample counts to available population projections.

Methods

The overall weighting approach for NAIIS included several steps. Methods and results for each of the steps below are detailed in the Sampling and Weighting Document.

Initial checks: Checks of the data files were carried out as part of the survey and data quality control and the probabilities of selection for EAs and households are calculated and checked.

Calculation of PSU base weights: The weighting process began with the calculation and checking of the sample EA base weights as the reciprocals of the overall PSU probabilities of selection.

Calculation of household weights: The next step was to calculate household weights. The household base weights were calculated as the EA weights multiplied by the reciprocal of the within-EA household selection probabilities. The household base weights were adjusted first to account for dwelling units for which it could not be determined whether the dwelling unit contained an eligible household and then the responding households had their weights adjusted to account for non-responding eligible households. This adjustment was made based on the EA the households are in and the resulting weight was the final household weight.

Calculation of person-level interview weights: Once the household weights were determined, they were used to calculate the individual base weights. The individual base weights were then adjusted for nonresponse among the eligible individuals, with a final adjustment for the individual weights to compensate for under-coverage in the sampling process by post-stratifying, i.e., weighting up, to 2018 population projections.

Calculation of person-level HIV testing weights: The individual weights adjusted for nonresponse were in turn the initial weights for the HIV testing data sample, with a further adjustment for nonresponse to HIV testing and a final post-stratification adjustment to compensate for under-coverage.

APPENDIX B LABORATORY METHODOLOGY

B.1 Field-Based Laboratory Procedures

Trained and qualified survey laboratory staff collected whole blood specimens from identified eligible and consenting participants. Specimen volume varied by age: a 14 mL venous blood specimen was collected from adults aged 15-64 years, a 6 mL venous blood specimen was collected from children aged 2-14 years and a 1 mL capillary blood specimen was collected from children aged <2 years, using a finger stick for children aged 6 to 23 months and a heel stick for infants below 6 months of age. For participants ≥2 years who could not provide a venous blood specimen, blood was collected from a finger stick using the 1 ml ethylene diamine tetra acetic acid (EDTA) microtube.

Blood samples were labeled with a unique pre-printed bar-coded participant identification number (PTID) and stored in temperature-controlled cooler boxes with ultra-low freezer packs which were replenished daily. At the end of each day, specimens were transported to a satellite laboratory for processing into plasma aliquots and dried blood spots (DBS) and were frozen within 24 hours of blood collection.

B.2 Household-Based Procedures

HBTC services, including HIV rapid testing and counseling, HBsAg and HCV rapid testing, point-of-care (POC) CD4 testing and return of results, were carried out in accordance with Nigeria's National HIV Testing Guidelines. HIV rapid testing was conducted in the field (Figure B.1) using a serial rapid-testing algorithm. Determine™ HIV ½ (Abbott Molecular Inc., Des Plaines, Illinois, United States) was used as a screening test. Uni-Gold™ (Trinity Biotech, plc., Wicklow, Ireland) was used as a confirmatory test. STAT PAK® HIV ½ Assay (Chembio Diagnostic Systems Inc., Medford, New York, United States) was used as a tie-breaker test for discordant screening and confirmatory tests. NAIIS participants with non-reactive results on the screening test were reported as HIV negative; those with a reactive screening test underwent confirmatory testing. Participants with reactive results on both the screening and confirmatory tests were classified as HIV-positive. Participants with a reactive screening test result, followed by a non-reactive confirmatory test result, had the tie-breaker test performed to determine HIV status. Participants with reactive tie-breaker tests were classified as HIV-positive while those with non-reactive tests were classified as HIV-negative.

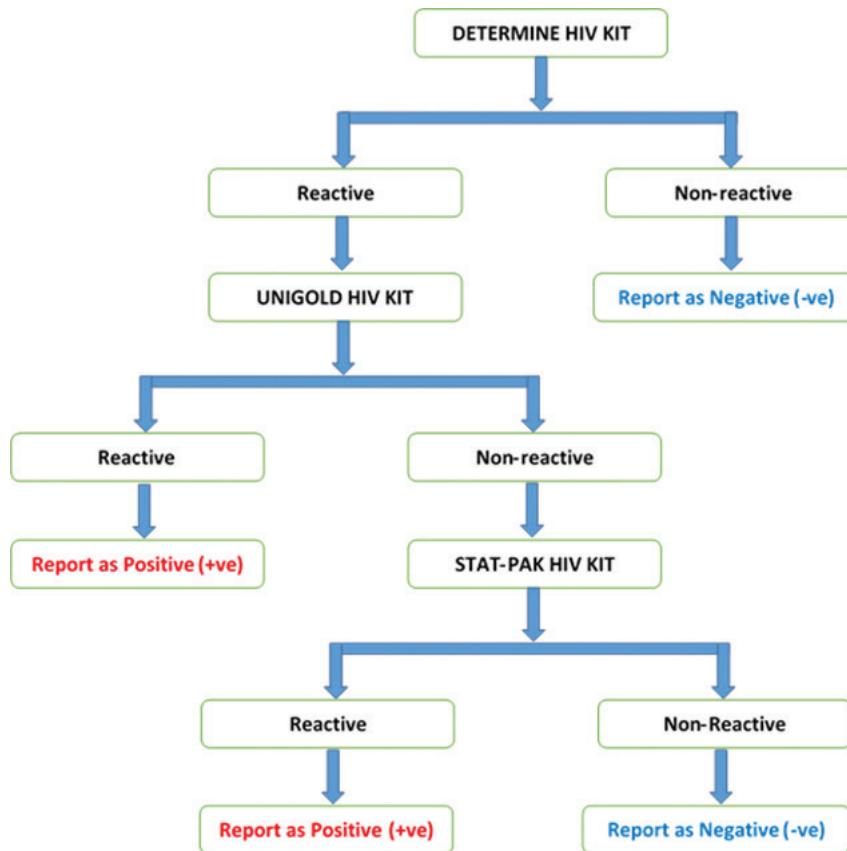


Figure B.1 Nigerian National Serial HIV Rapid Testing Algorithm, NAIIS 2018

CD4 Testing

CD4 cell count was measured for all participants who tested HIV positive and a randomly selected 2% of the population who tested HIV negative. All CD4 testing was performed using the validated Pima™ CD4 Point of Care Testing (POCT) system (Abbott Molecular Inc., Chicago, IL, United States, formerly Alere).

Hepatitis B Virus (HBV) and Hepatitis C Virus (HCV) Testing

All HIV-positive participants (aged 15-64) and approximately 5,303 randomly selected HIV-negative respondents (aged 15-64) were screened for HBV using Determine™ HBsAg test kit (Abbott Inc., Chicago, Illinois, United States, formerly Alere) and for HCV using OraQuick® HCV Rapid Antibody Test (OraSure Technologies, Inc., Bethlehem, Pennsylvania, United States). Participants with a positive HCV antibody result underwent confirmatory HCV RNA quantitative PCR testing (viral load test) using Roche platform.

Quality Assurance (QA) and Quality Control (QC)

QC panels consisting of positive and negative control specimens and PT panels which contained blinded positive and negative levels of all biomarkers (HIV, HBV and HCV) were regularly distributed to both the field and satellite laboratories. To ensure that test kits and staff competencies were adequately monitored, bi-weekly QC testing and two rounds of PT panels were completed. The first 50 HIV rapid tests performed by each field laboratorian were retested at the satellite lab until concordance was 100%.

B.3 Satellite and Central Laboratory-Based Procedures

At the satellite laboratories, specimens were processed into plasma aliquots and one to two DBS cards, depending on age of the participant and volume of the specimen. For infants <2 years, who provided blood from a heel stick in a one mL microtube, one to two DBS cards were prepared. All DBS cards were prepared in the laboratory. Plasma and DBS samples were labeled with unique bar-code labels generated from the LDMS. Plasma aliquots and DBS were frozen within 24 hours of blood collection. Specimens were stored in the satellite laboratories in -20°C freezers with temperature control monitors. Within a week, specimens were transported to the central laboratory using the cooler boxes with ultra-low freezer packs. At the central laboratory, specimens were stored in -80°C freezers with temperature control monitors in a purpose-built biorepository with a secured electrical supply.

Geenius™ HIV 1/2 Testing

All HIV-positive specimens were retested at the satellite laboratory using Geenius™ HIV 1/2 Supplemental Assay (Bio-Rad, Hercules, California, United States) as the confirmatory test. Participants who had reactive results on both rapid and Geenius™ HIV 1/2 tests were classified as HIV-positive. Participant specimens with a reactive rapid test result followed by a non-reactive confirmatory test result at the satellite laboratory were subjected to further QA discrepancy resolution at the central laboratory. Specimens from participants who self-reported being HIV positive with an HIV negative test result at HBT received further testing, including additional HIV serial rapid testing and Geenius™ HIV 1/2 testing in the satellite and central laboratories as well as deoxyribonucleic acid (DNA) polymerase chain reaction (PCR) to resolve discrepancies.

HIV Viral Load Testing

VL testing of HIV-positive participants was done using the Roche solutions for molecular diagnostics (COBAS® AmpliPrep/COBAS® TaqMan® HIV-1 Test, version 2.0, Roche Molecular Diagnostics, Indianapolis, Indiana, United States).

HIV-1 VL using DBS specimens from children and adults with an insufficient volume of plasma was measured on the Roche COBAS® AmpliPrep instrument and COBAS® TaqMan® 48 analyzer using the COBAS® AmpliPrep/COBAS® TaqMan® free virus elution (FVE) protocol, HIV-1 Test version 2.0 (Roche Molecular Diagnostics, Branchburg, New Jersey, United States) and internal QC was performed according to the manufacturer's specifications.

VL results were sent to the health facilities selected by the HIV-positive participant within 8 to 10 weeks of specimen collection. The facility referral focal person contacted the HIV-positive participant via mobile phone, informing them that their VL results were available. The facility referral focal person also used the mobile phone to document that the participant enrolled into care, initiated on antiretroviral therapy (ART) and received viral load results using the Unstructured Supplementary Service Data (USSD) codes.

Classification of Final HIV Status

For participants aged 18 months-64 years, the algorithm for classification of final HIV status included results from rapid HIV testing and Geenius™ HIV 1/2 confirmatory testing on all positives. In addition, Western Blot, TNA PCR and VL RNA PCR were done on discrepant results. For participants less than 18 months, the algorithm for classification of final HIV status included results from rapid HIV testing and HIV TNA PCR. Classification of final HIV status was used to determine estimates for HIV prevalence and to inform estimates for HIV incidence.

Infant HIV Virologic Testing (IVT)/Early Infant Diagnosis (EID)

All infants <18 months were tested for HIV using the Determine™ HIV 1/2 Rapid Test. Infants who were reactive on Determine received IVT/EID testing using prepared DBS. In addition, infants born to mothers of unknown HIV status or HIV-positive mothers were screened using the Determine™ HIV 1/2 HIV Test and received IVT/EID testing using prepared DBS. HIV TNA PCR using COBAS® TaqMan® HIV-1 Qualitative Test (Roche Molecular Systems, Branchburg, NJ, USA) United States) analyzer was conducted at the central laboratory. Specimens with HIV-negative results were categorized as HIV negative while specimens with HIV-positive results were reported as HIV-positive. Results were returned to the infant's parent or guardian at the household within two weeks of specimen collection.

HIV Recent Infection Testing Algorithm

A total of 2,759 specimens were tested at the central laboratory for HIV incidence at the end of data collection. Specimens from HIV-positive participants ≥18 months old were tested for recent HIV infection using the HIV-1 Limiting Antigen (LAG) Avidity Assay Testing Algorithm (Figure B.2). This assay was based on the principle of Enzyme Immunoassay (EIA).

Two different laboratory-based testing algorithms were used to estimate incidence for PLHIV participants ≥18 months old. HIV-1 LAg Avidity plus VLVL and HIV-1 LAg Avidity plus viral load and ARV detection were used to distinguish recent from long-term infection. Incidence estimates were obtained using the formula recommended by the WHO Incidence Working Group and Consortium for Evaluation and Performance of Incidence Assays, with assay performance characteristics of an MDRI of 130 days (95% CI: 118, 142), a time cutoff (T) of 1.0 year and a residual proportion false recent (PFR) of 0.00. Each algorithm employed a combination of assays: HIV-1 LAg Avidity EIA (Sedia Biosciences Corporation, Portland, Oregon, United States) and VL (Figure B.2) and HIV-1 LAg Avidity EIA, VL and ARV detection.

Specimens with a normalized optical density (ODn) value ≤2.0 during initial testing were confirmed by further testing of the specimen in triplicate. For those HIV-positive specimens with median normalized ODn value ≤1.5, VL results were reviewed to increase the positive predictive value of true recent infections. Specimens with ODn values >1.5 were classified as long-term infections. Specimens with final ODn value <0.4 were retested by the HIV diagnostic testing algorithm to confirm HIV-1 seropositivity (Figure B.2).

Specimens identified as HIV negative based on the ODn reading were excluded from the total number of HIV-positive specimens and incorporated into the total number of HIV-negative specimens for incidence estimation. Specimens with VL <1,000 copies/mL were classified as long-term infections, while those with VL ≥1,000 copies/mL were classified as recent infections (Figure B.2). In the ARV-adjusted algorithm, specimens with VL ≥1,000 copies/mL and with detectable ARVs were classified as long-term infections, while specimens with VL ≥1,000 copies/mL and without detectable ARVs were classified as recent infections.

Incidence estimation is based on recent/long-term (LT) classification using algorithms with LAg Avidity.^{1,2,3} The first testing algorithm (i.e., HIV-1 LAg Avidity plus VL) uses VL testing to exclude specimens with low VL and limit misclassification of persons as recent infections who are elite controllers or on effective ART. The second algorithm (i.e., HIV-1 LAg Avidity plus VL and ARV detection) uses ARV detection to exclude specimens with high VL and limit misclassification as recent infections of persons who are on ART but have poor treatment adherence.

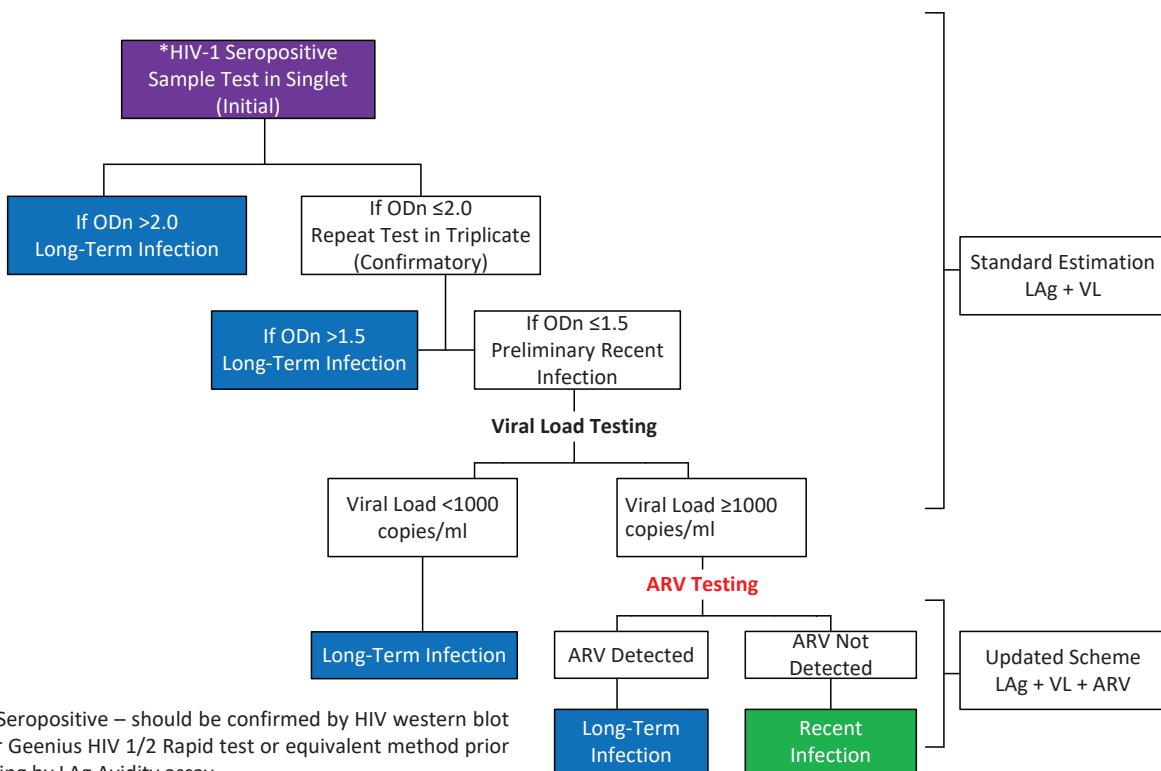


Figure B.2 Testing Algorithm for LAg Avidity Testing, NAIIS 2018

Detection of Antiretrovirals

ARV detection was performed by the Division of Clinical Pharmacology of the Department of Medicine at the University of Cape Town, South Africa. Qualitative screening, for detectable concentrations of ARVs, was conducted on DBS specimens from all HIV-positive adults and children using high-resolution liquid chromatography coupled with tandem mass spectrometry (MS). Protein precipitation followed by high performance liquid chromatography with MS/MS detection using a gradient elution methodology described by Koal et al.¹ was used for the qualitative determination of four ARV drugs from DBS. This qualitative assay separates the parent compound from the fragments and is highly specific and highly sensitive, with a limit of detection of 0.02 µg/mL for each drug and a signal-to-noise ratio of at least 5:1 for all drugs. Four ARVs, efavirenz, lopinavir, atazanavir and nevirapine, were selected as markers for the most commonly prescribed first- and second-line regimens. These ARVs have relatively long half-lives, allowing for a longer period of detection following intake. Detection of ARVs indicates participant use of a given drug at the time of blood collection. Specimens from participants who were virally suppressed or self-reported being on ART but had no evidence of the first three compounds were tested for nevirapine. Results below the limit of detection among individuals who reported taking ART indicate that there was no recent exposure to the regimen and that adherence to a prescribed regimen was suboptimal, but cannot be interpreted as “not on ART.” Given the limited number of ARVs selected for detection, NAIIS could not rule out the use of other ART regimens.

References

- Koal T, Burhenne H, Römling R, Svoboda M, Resch K, Kaever V. Quantification of antiretroviral drugs in dried blood spot samples by means of liquid chromatography/tandem mass spectrometry. *Rapid Commun Mass Spectrom*. 2005;19(21):2995-3001.

APPENDIX C ESTIMATES OF SAMPLING ERRORS

Estimates from sample surveys are affected by two types of errors: non-sampling errors and sampling errors. Non-sampling errors result from mistakes made during data collection, e.g., misinterpretation of an HIV test result and data management errors such as transcription errors during data entry. While NAIIS implemented numerous quality assurance and control measures to minimize non-sampling errors, these were impossible to avoid and difficult to evaluate statistically. In contrast, sampling errors can be evaluated statistically. Sampling errors are a measure of the variability between all possible samples. The sample of respondents selected for NAIIS was only one of many samples that could have been selected from the same population, using the same design and expected size. Each of these samples could yield results that differed somewhat from the results of the actual sample selected. Although the degree of variability cannot be known exactly, it can be estimated from the survey results.

The standard error, which is the square root of the variance, is the usual measurement of sampling error for a statistic (e.g., proportion, mean, rate, count). In turn, the standard error can be used to calculate confidence intervals within which the true value for the population can reasonably be assumed to fall. For example, for any given statistic calculated from a sample survey, the value of that statistic will fall within a range of approximately plus or minus two times the standard error of that statistic in 95% of all possible samples of identical size and design.

NAIIS utilized a multi-stage stratified sample design, which required complex calculations to obtain sampling errors. The Taylor linearization method of variance estimation was used for survey estimates that are proportions, e.g., HIV prevalence. The Jackknife repeated replication method was used for variance estimation of more complex statistics such as rates, e.g., annual HIV incidence and counts such as the number of people living with HIV.

The Taylor linearization method treats any percentage or average as a ratio estimate, $r = y/x$, where y represents the total sample value for variable y and x represents the total number of cases in the group or subgroup under consideration. The variance of r is computed using the formula given below, with the standard error being the square root of the variance:

$$SE^2(r) = \text{var}(r) = \frac{1-f}{x^2} \sum_{h=1}^H \left[\frac{m_h}{m_h - 1} \left(\sum_{i=1}^{m_h} z_{hi}^2 - \frac{z_h^2}{m_h} \right) \right]$$

in which

$$z_{hi} = y_{hi} - rx_{hi} \text{ and } z_h = y_h - rx_h$$

Where h represents the stratum, which varies from 1 to H ,

m_h is the total number of clusters selected in the h^{th} stratum,

y_{hi} is the sum of the weighted values of variable y in the i^{th} cluster in the h^{th} stratum,

x_{hi} is the sum of the weighted number of cases in the i^{th} cluster in the h^{th} stratum and,

f is the overall sampling fraction, which is so small that it is ignored.

In addition to the standard error, the design effect for each estimate is also calculated. The design effect is defined as the ratio of the standard error using the given sample design to the standard error that would result if a simple random sample had been used. A design effect of 1.0 indicates that the sample design is as efficient as a simple random sample, while a value greater than 1.0 indicates the increase in the sampling error due to the use of a more complex and less statistically efficient design. Confidence limits for the estimates, which are calculated as

$$r \pm t_{(0.975, K)} \sqrt{\text{var}(r)}$$

where $t_{(0.975, K)}$ is the 97.5th percentile of a t -distribution with K degrees of freedom, are also computed.

Sampling errors for selected variables from NAIIS are presented in Tables C.1 through C.9. For most variables, sampling error tables include the weighted estimate, unweighted denominator, standard error or design effect and lower- and upper-95% confidence limits.

Table C.1 Sampling errors: Annual HIV incidence LAg/VL/ARV testing algorithm by sex and age, NAIIS 2018

Age (years)	Weighted estimate (%)	Design effect	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL				
15-24	0.04	1.03	0.01	0.07
25-34	0.15	1.92	0.07	0.24
35-49	0.08	2.11	0.01	0.14
15-49	0.08	1.68	0.05	0.12
15-64	0.08	1.70	0.05	0.11
MALES				
15-24	0.03	0.99	0.00	0.07
25-34	0.10	1.44	0.01	0.19
35-49	0.05	3.11	0.00	0.15
15-49	0.06	1.70	0.02	0.10
15-64	0.05	1.79	0.02	0.09
FEMALES				
15-24	0.05	1.10	0.01	0.10
25-34	0.21	2.39	0.07	0.35
35-49	0.10	1.46	0.02	0.18
15-49	0.11	1.76	0.06	0.16
15-64	0.11	1.75	0.06	0.16

Table C.2 Sampling errors: HIV prevalence by sex and age, NAIIS 2018

Age	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
0-17 months	0.19	2,291	0.09	0.02	0.36
18-59 months	0.11	7,634	0.04	0.04	0.19
5-9 years	0.13	12,781	0.03	0.07	0.20
10-14 years	0.16	9,788	0.05	0.07	0.25
Total 0-4 years	0.13	9,925	0.03	0.07	0.20
Total 0-14 years	0.14	32,494	0.02	0.10	0.19
15-19 years	0.23	28,897	0.03	0.16	0.29
20-24 years	0.80	24,426	0.06	0.67	0.92
25-29 years	1.22	25,470	0.09	1.05	1.38
30-34 years	1.60	21,393	0.11	1.40	1.81
35-39 years	2.23	19,328	0.14	1.96	2.49
40-44 years	2.16	15,549	0.14	1.89	2.43
45-49 years	2.45	12,023	0.17	2.12	2.77
50-54 years	2.32	10,986	0.18	1.97	2.67
55-59 years	2.02	7,112	0.21	1.61	2.43
60-64 years	1.44	8,532	0.15	1.14	1.74
Total 15-24 years	0.49	53,323	0.03	0.42	0.55
Total 15-49 years	1.27	147,086	0.04	1.19	1.35
Total 15-64 years	1.36	173,716	0.04	1.28	1.45
MALES					
0-17 months	0.08	1,159	0.08	0.00	0.25
18-59 months	0.11	3,937	0.04	0.02	0.19
5-9 years	0.12	6,505	0.04	0.03	0.21
10-14 years	0.17	4,972	0.07	0.03	0.30
Total 0-4 years	0.10	5,096	0.04	0.02	0.18
Total 0-14 years	0.13	16,573	0.03	0.07	0.19
15-19 years	0.15	13,344	0.04	0.07	0.23
20-24 years	0.33	10,368	0.06	0.21	0.46
25-29 years	0.66	10,592	0.09	0.48	0.85
30-34 years	1.00	9,067	0.13	0.74	1.26
35-39 years	1.37	8,623	0.17	1.04	1.70
40-44 years	1.72	6,904	0.18	1.37	2.06
45-49 years	2.20	5,769	0.22	1.76	2.63
50-54 years	2.32	5,053	0.26	1.81	2.84
55-59 years	1.63	3,773	0.24	1.16	2.10

Table C.2 Sampling errors: HIV prevalence by sex and age, NAIIS 2018 (continued)

Age	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
MALES					
60-64 years	1.42	4,477	0.20	1.02	1.81
Total 15-24 years	0.23	23,712	0.04	0.16	0.30
Total 15-49 years	0.83	64,667	0.04	0.75	0.92
Total 15-64 years	0.96	77,970	0.04	0.87	1.05
FEMALES					
0-17 months	0.29	1,132	0.15	0.00	0.59
18-59 months	0.12	3,697	0.05	0.02	0.23
5-9 years	0.14	6,276	0.05	0.05	0.24
10-14 years	0.16	4,816	0.06	0.04	0.27
Total 0-4 years	0.16	4,829	0.05	0.06	0.27
Total 0-14 years	0.16	15,921	0.03	0.09	0.22
15-19 years	0.31	15,553	0.05	0.21	0.40
20-24 years	1.29	14,058	0.11	1.08	1.50
25-29 years	1.80	14,878	0.13	1.54	2.06
30-34 years	2.23	12,326	0.16	1.92	2.54
35-39 years	3.12	10,705	0.21	2.71	3.53
40-44 years	2.62	8,645	0.20	2.23	3.01
45-49 years	2.70	6,254	0.25	2.21	3.19
50-54 years	2.31	5,933	0.24	1.85	2.78
55-59 years	2.40	3,339	0.32	1.76	3.03
60-64 years	1.46	4,055	0.24	1.00	1.92
Total 15-24 years	0.75	29,611	0.06	0.64	0.87
Total 15-49 years	1.74	82,419	0.06	1.62	1.85
Total 15-64 years	1.79	95,746	0.06	1.67	1.90

Table C.3 Sampling errors: HIV prevalence by residence and state, persons aged 15-64 years, NAIIS 2018

Characteristic	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
Place of residence					
Urban	1.3	72,790	0.1	1.1	1.4
Rural	1.5	100,926	0.1	1.4	1.6
State					
Abia	2.0	5,767	0.2	1.6	2.4
Adamawa	1.1	5,286	0.2	0.7	1.4
Akwa Ibom	4.8	4,381	0.4	4.0	5.5
Anambra	2.2	4,653	0.3	1.6	2.8
Bauchi	0.5	6,124	0.1	0.2	0.8
Bayelsa	1.7	3,892	0.2	1.3	2.2
Benue	4.8	4,566	0.5	3.9	5.7
Borno	1.1	1,815	0.3	0.5	1.7
Cross River	1.8	4,617	0.2	1.3	2.3
Delta	1.7	3,929	0.2	1.3	2.2
Ebonyi	0.8	6,413	0.1	0.6	1.0
Edo	1.8	4,318	0.2	1.4	2.2
Ekiti	0.7	3,613	0.2	0.4	1.0
Enugu	1.8	4,756	0.2	1.3	2.2
FCT ¹	1.4	4,631	0.2	1.0	1.8
Gombe	1.2	6,539	0.2	0.7	1.6
Imo	1.7	5,443	0.2	1.2	2.1
Jigawa	0.3	5,702	0.1	0.2	0.5
Kaduna	1.0	5,253	0.2	0.6	1.4
Kano	0.6	4,387	0.2	0.3	0.9
Katsina	0.3	4,124	0.1	0.1	0.5
Kebbi	0.6	4,243	0.1	0.3	0.9
Kogi	0.8	4,191	0.2	0.5	1.2
Kwara	0.8	4,077	0.2	0.5	1.2
Lagos	1.3	7,502	0.2	1.0	1.6
Nasarawa	1.8	5,368	0.2	1.3	2.2
Niger	0.6	5,949	0.1	0.4	0.9
Ogun	1.4	3,584	0.2	1.0	1.8
Ondo	1.0	4,094	0.2	0.6	1.4
Osun	0.9	3,637	0.2	0.6	1.2
Oyo	0.9	4,118	0.2	0.6	1.2

Table C.3 Sampling errors: HIV prevalence by residence and state, persons aged 15-64 years, NAIIS 2018 (continued)

Characteristic	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
Plateau	1.5	5,274	0.2	1.1	1.8
Rivers	3.6	3,955	0.4	2.9	4.3
Sokoto	0.4	4,036	0.1	0.2	0.6
Taraba	2.6	6,772	0.3	2.0	3.3
Yobe	0.4	4,300	0.1	0.1	0.6
Zamfara	0.4	2,407	0.2	0.1	0.7
MALES					
Place of residence					
Urban	0.9	32,172	0.1	0.8	1.0
Rural	1.0	45,798	0.1	0.9	1.2
State					
Abia	1.7	2,306	0.3	1.2	2.3
Adamawa	0.8	2,601	0.2	0.5	1.1
Akwa Ibom	2.9	1,939	0.4	2.1	3.7
Anambra	1.8	1,922	0.3	1.1	2.4
Bauchi	0.4	2,921	0.1	0.1	0.7
Bayelsa	1.4	1,722	0.3	0.9	2.0
Benue	3.5	2,156	0.4	2.6	4.3
Borno	1.0	795	0.4	0.2	1.8
Cross River	1.6	2,116	0.2	1.1	2.0
Delta	1.2	1,580	0.3	0.6	1.8
Ebonyi	0.7	2,400	0.2	0.4	1.0
Edo	1.2	1,891	0.2	0.7	1.6
Ekiti	0.3	1,606	0.1	0.1	0.6
Enugu	1.3	1,806	0.3	0.7	1.8
FCT ¹	0.8	2,271	0.2	0.4	1.1
Gombe	0.8	3,283	0.2	0.4	1.2
Imo	1.3	2,190	0.3	0.7	1.9
Jigawa	0.1	2,766	0.1	0.0	0.3
Kaduna	0.6	2,471	0.2	0.3	1.0
Kano	0.4	2,125	0.1	0.1	0.6
Katsina	0.2	1,915	0.1	0.0	0.5
Kebbi	0.4	1,975	0.1	0.1	0.7
Kogi	0.5	1,846	0.2	0.1	0.8
Kwara	0.4	1,913	0.1	0.2	0.7
Lagos	0.8	3,111	0.2	0.5	1.2

Table C.3 Sampling errors: HIV prevalence by residence and state, persons aged 15-64 years, NAIIS 2018 (continued)

Characteristic	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
MALES					
Nasarawa	1.3	2,566	0.2	0.9	1.7
Niger	0.4	2,802	0.1	0.2	0.6
Ogun	0.9	1,424	0.2	0.5	1.3
Ondo	0.8	1,777	0.2	0.3	1.2
Osun	0.7	1,515	0.2	0.4	1.1
Oyo	0.8	1,822	0.2	0.4	1.3
Plateau	0.6	2,370	0.1	0.3	0.9
Rivers	2.8	1,791	0.5	1.8	3.7
Sokoto	0.4	1,956	0.2	0.1	0.7
Taraba	1.7	3,119	0.2	1.3	2.2
Yobe	0.5	2,153	0.2	0.1	0.8
Zamfara	0.3	1,048	0.2	0.0	0.7
FEMALES					
Place of residence					
Urban	1.6	40,618	0.1	1.5	1.8
Rural	1.9	55,128	0.1	1.8	2.1
State					
Abia	2.2	3,461	0.2	1.7	2.7
Adamawa	1.4	2,685	0.3	0.8	2.0
Akwa Ibom	6.7	2,442	0.6	5.5	7.8
Anambra	2.6	2,731	0.4	1.8	3.4
Bauchi	0.6	3,203	0.2	0.2	1.0
Bayelsa	2.1	2,170	0.3	1.5	2.7
Benue	6.3	2,410	0.7	5.0	7.6
Borno	1.2	1,020	0.4	0.5	1.9
Cross River	2.1	2,501	0.3	1.4	2.7
Delta	2.2	2,349	0.4	1.5	2.9
Ebonyi	0.9	4,013	0.2	0.6	1.2
Edo	2.3	2,427	0.3	1.7	3.0
Ekiti	1.1	2,007	0.2	0.6	1.6
Enugu	2.2	2,950	0.3	1.6	2.8
FCT ¹	2.2	2,360	0.4	1.5	2.9
Gombe	1.6	3,256	0.3	1.0	2.3
Imo	2.0	3,253	0.3	1.5	2.6
Jigawa	0.5	2,936	0.1	0.2	0.8
Kaduna	1.4	2,782	0.3	0.8	2.0

Table C.3 Sampling errors: HIV prevalence by residence and state, persons aged 15-64 years, NAIIS 2018 (continued)

Characteristic	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
FEMLAES					
Kano	0.7	2,262	0.2	0.3	1.2
Katsina	0.4	2,209	0.2	0.0	0.7
Kebbi	0.8	2,268	0.2	0.4	1.3
Kogi	1.2	2,345	0.2	0.8	1.7
Kwara	1.3	2,164	0.3	0.8	1.8
Lagos	1.9	4,391	0.2	1.4	2.3
Nasarawa	2.4	2,802	0.3	1.7	3.0
Niger	1.0	3,147	0.2	0.6	1.3
Ogun	1.9	2,160	0.3	1.2	2.5
Ondo	1.3	2,317	0.3	0.7	1.8
Osun	1.0	2,122	0.2	0.6	1.5
Oyo	1.0	2,296	0.3	0.5	1.4
Plateau	2.3	2,904	0.3	1.7	2.9
Rivers	4.6	2,164	0.5	3.6	5.7
Sokoto	0.4	2,080	0.2	0.1	0.7
Taraba	3.6	3,653	0.5	2.6	4.6
Yobe	0.3	2,147	0.1	0.0	0.5
Zamfara	0.5	1,359	0.2	0.2	0.9
¹ FCT – Federal Capital Territory.					

Table C.4 Sampling errors: Viral load suppression by age, NAIIS 2018

Age (years)	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
0 to 14	21.8	51	6.2	9.5	34.0
15 to 24	32.6	316	3.4	26.0	39.2
25 to 34	33.9	748	2.2	29.7	38.2
35 to 44	47.1	855	2.1	43.0	51.3
45 to 54	52.3	552	2.6	47.2	57.4
55 to 64	49.9	268	3.8	42.4	57.3
Total 15-24 years	32.6	316	3.4	26.0	39.2
Total 15-49 years	40.9	2,208	1.4	38.2	43.6
Total 15-64 years	43.1	2,739	1.3	40.6	45.6
MALES					
0 to 14	*	23	7.2	0.0	24.6
15 to 24	33.6	61	8.0	18.0	49.3
25 to 34	20.4	164	3.6	13.3	27.6
35 to 44	37.8	248	4.0	30.0	45.5
45 to 54	50.7	242	3.9	43.1	58.4
55 to 64	52.3	130	5.3	41.9	62.6
Total 15-24 years	33.6	61	8.0	18.0	49.3
Total 15-49 years	33.5	601	2.4	28.7	38.2
Total 15-64 years	38.8	845	2.1	34.7	42.9
FEMALES					
0 to 14	*	28	9.3	13.4	50.1
15 to 24	32.2	255	3.5	25.4	39.1
25 to 34	39.7	584	2.5	34.9	44.6
35 to 44	52.3	607	2.4	47.6	57.0
45 to 54	53.7	310	3.3	47.2	60.2
55 to 64	48.1	138	5.1	38.0	58.2
Total 15-24 years	32.2	255	3.5	25.4	39.1
Total 15-49 years	44.7	1,607	1.5	41.8	47.6
Total 15-64 years	45.5	1,894	1.4	42.7	48.3

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table C.5 Sampling errors: Viral load suppression by residence and zone, persons aged 15-64 years, NAIIS 2018

Characteristics	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
Place of residence					
Urban	46.7	1,078	2.0	42.7	50.7
Rural	40.3	1,661	1.6	37.1	43.5
Geopolitical zone					
North West	46.7	175	4.6	37.7	55.6
North East	49.5	403	4.3	41.0	57.9
North Central	63.8	651	2.2	59.4	68.2
South East	36.6	477	2.7	31.4	41.9
South South	31.1	712	2.1	26.9	35.3
South West	41.2	321	3.4	34.5	47.9
MALES					
Place of residence					
Urban	38.9	319	3.4	32.2	45.6
Rural	38.7	526	2.6	33.5	43.9
Geopolitical zone					
North West	52.1	55	7.9	36.6	67.5
North East	46.4	141	5.6	35.5	57.3
North Central	60.0	189	4.3	51.6	68.4
South East	35.2	148	4.5	26.4	44.1
South South	27.2	221	3.4	20.6	33.8
South West	26.9	91	5.3	16.5	37.3
FEMALES					
Place of residence					
Urban	51.1	759	2.3	46.6	55.5
Rural	41.2	1,135	1.8	37.6	44.7
Geopolitical zone					
North West	43.7	120	5.4	33.1	54.3
North East	51.5	262	4.9	41.8	61.2
North Central	65.7	462	2.4	61.0	70.4
South East	37.5	329	3.0	31.5	43.4
South South	33.3	491	2.5	28.3	38.2
South West	48.8	230	3.8	41.3	56.2

Table C.6 Sampling errors: Self-reported ARV 90-90-90 by age (conditional percentages), NAIIS 2018

Age (years)	Diagnosed				On Treatment				Virally Suppressed						
	Weight- ed estimate (%)	Un- weight- ed num- ber	Stand- ard error (%)	Lower confi- dence limit (%)	Upper confi- dence limit (%)	Weight- ed estime- te (%)	Un- weight- ed num- ber	Stand- ard error (%)	Lower confi- dence limit (%)	Upper confi- dence limit (%)	Weight- ed estime- te (%)	Un- weight- ed num- ber	Stand- ard error (%)	Lower confi- dence limit (%)	Upper confi- dence limit (%)
TOTAL															
15-24	14.4	304	2.4	9.7	19.0	71.6	47	7.6	56.6	86.6	80.9	35	7.7	65.8	96.0
25-34	21.7	724	1.9	17.9	25.4	81.9	167	4.1	73.9	90.0	78.6	144	4.0	70.7	86.5
35-49	35.1	1,113	1.8	31.6	38.6	91.8	408	1.6	88.8	94.9	82.5	376	2.4	77.8	87.2
15-49	27.5	2,141	1.3	25.0	30.0	87.7	622	1.7	84.4	91.0	81.5	555	1.9	77.7	85.2
15-64	28.9	2,660	1.2	26.6	31.2	89.8	816	1.3	87.1	92.4	82.5	743	1.6	79.4	85.7
MALES															
15-24	8.9	60	5.0	0.0	18.7	*	5	14.3	57.9	100.0	*	4	8.7	75.2	100.0
25-34	13.5	160	3.3	7.1	19.9	*	22	7.2	72.7	100.0	*	19	11.9	49.3	96.0
35-49	29.9	368	2.9	24.3	35.5	95.3	124	1.8	91.8	98.8	77.3	117	5.2	67.0	87.6
15-49	22.7	588	2.1	18.5	26.8	93.4	151	2.0	89.5	97.3	77.2	140	4.7	68.0	86.3
15-64	27.1	828	1.9	23.5	30.8	93.8	251	1.6	90.7	97.0	79.5	234	3.5	72.6	86.4
FEMALES															
15-24	16.2	244	2.7	10.9	21.4	68.9	42	8.3	52.5	85.3	78.3	31	8.8	61.1	95.5
25-34	25.2	564	2.2	20.8	29.6	80.8	145	4.6	71.8	89.8	80.1	125	4.0	72.2	88.0
35-49	38.4	745	2.2	34.2	42.6	90.1	284	2.1	85.9	94.3	85.2	259	2.3	80.6	89.7
15-49	30.0	1,553	1.4	27.2	32.8	85.4	471	2.1	81.3	89.6	83.3	415	1.9	79.5	87.0
15-64	29.9	1,832	1.3	27.3	32.5	87.7	565	1.8	84.1	91.2	84.2	509	1.7	80.9	87.5

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table C.7 Sampling errors: ARV-adjusted 90-90-90 by age (conditional percentages), NAIIS 2018

Age (years)	Diagnosed				On Treatment				Virally Suppressed						
	Weight- ed esti- mate (%)	Un- weight- ed num- ber	Stan- dard error (%)	Lower confi- dence limit (%)	Upper confi- dence limit (%)	Weight- ed esti- mate (%)	Un- weight- ed number	Stan- dard error (%)	Lower confi- dence limit (%)	Upper confi- dence limit (%)	Weight- ed esti- mate (%)	Un- weight- ed num- ber	Stan- dard error (%)	Lower confi- dence limit (%)	Upper confi- dence limit (%)
TOTAL															
15-24	31.0	308	3.4	24.3	37.7	92.3	97	2.9	86.5	98.1	77.1	90	5.3	66.7	87.4
25-34	38.6	738	2.3	34.1	43.1	95.9	322	1.3	93.3	98.4	75.2	310	3.2	68.9	81.5
35-49	52.8	1,134	1.8	49.2	56.3	96.2	629	1.0	94.3	98.0	82.0	607	1.9	78.3	85.7
15-49	44.8	2,180	1.4	42.0	47.6	95.7	1,048	0.8	94.1	97.2	79.6	1,007	1.5	76.6	82.6
15-64	46.9	2,705	1.3	44.4	49.5	96.4	1,366	0.6	95.2	97.6	80.9	1,322	1.3	78.3	83.5
MALES															
15-24	28.8	60	8.1	13.0	44.6	*	14	4.4	87.1	100.0	*	13	13.7	46.0	99.8
25-34	19.2	161	3.6	12.1	26.2	96.5	34	3.4	89.8	100.0	65.8	33	9.8	46.6	85.0
35-49	45.3	372	3.1	39.2	51.4	98.2	187	1.0	96.2	100.0	77.4	183	4.1	69.4	85.3
15-49	35.8	593	2.4	31.1	40.6	97.7	235	1.0	95.7	99.7	75.2	229	3.6	68.0	82.3
15-64	40.9	835	2.1	36.8	45.1	97.8	382	0.8	96.1	99.4	79.2	373	2.7	73.8	84.6
FEMALES															
15-24	31.7	248	3.6	24.7	38.8	91.3	83	3.6	84.3	98.3	78.4	77	5.4	67.7	89.0
25-34	46.9	577	2.5	42.0	51.8	95.7	288	1.4	93.0	98.5	76.9	277	3.3	70.4	83.3
35-49	57.4	762	2.1	53.3	61.5	95.2	442	1.3	92.6	97.8	84.4	424	1.9	80.7	88.0
15-49	49.3	1,587	1.5	46.3	52.3	94.9	813	1.0	93.0	96.8	81.3	778	1.6	78.1	84.4
15-64	50.3	1,870	1.4	47.5	53.1	95.8	984	0.8	94.2	97.3	81.7	949	1.5	78.8	84.6

An asterisk indicates that an estimate is based on a very small number (30 or less) of unweighted cases and has been suppressed.

Table C.8 Sampling errors: HBV prevalence by age, NAIIS 2018

Age (years)	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
15-19	7.9	1,047	1.0	5.9	9.9
20-24	8.6	1,279	1.1	6.3	10.8
25-29	9.5	1,593	1.0	7.5	11.5
30-34	9.5	1,448	1.2	7.2	11.7
35-39	10.2	1,386	1.2	7.9	12.6
40-44	7.7	1,118	1.1	5.5	9.9
45-49	5.9	811	1.2	3.6	8.3
50-54	6.3	749	1.4	3.5	9.2
55-59	2.5	456	0.8	0.9	4.1
60-64	3.8	551	1.1	1.7	5.9
Total 15-24 years	8.2	2,326	0.8	6.7	9.7
Total 15-49 years	8.6	8,682	0.4	7.8	9.5
Total 15-64 years	8.1	10,438	0.4	7.3	8.9
MALES					
15-19	10.3	443	1.7	7.0	13.5
20-24	10.7	464	2.0	6.8	14.6
25-29	13.7	605	1.8	10.2	17.2
30-34	11.2	591	1.9	7.5	14.9
35-39	13.1	561	1.9	9.5	16.8
40-44	9.2	485	1.7	5.8	12.5
45-49	7.7	405	1.7	4.3	11.1
50-54	6.1	344	1.7	2.8	9.5
55-59	3.9	229	1.5	1.0	6.8
60-64	5.2	267	1.9	1.5	8.8
Total 15-24 years	10.5	907	1.3	7.9	13.0
Total 15-49 years	11.1	3,554	0.7	9.6	12.5
Total 15-64 years	10.3	4,394	0.7	9.0	11.6
FEMALES					
15-19	5.4	604	1.1	3.2	7.6
20-24	6.4	815	1.1	4.3	8.5
25-29	5.1	988	0.9	3.4	6.8
30-34	7.6	857	1.3	5.1	10.2
35-39	7.2	825	1.4	4.5	10.0
40-44	6.3	633	1.4	3.5	9.1
45-49	4.1	406	1.7	0.8	7.4
50-54	6.6	405	2.3	2.0	11.1

Table C.8 Sampling errors: HBV prevalence by age, NAIIS 2018 (continued)

Age (years)	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
FEMALES					
55-59	1.1	227	0.7	0.0	2.5
60-64	2.5	284	1.1	0.3	4.7
Total 15-24 years	5.9	1,419	0.8	4.4	7.4
Total 15-49 years	6.1	5,128	0.5	5.1	7.0
Total 15-64 years	5.8	6,044	0.4	4.9	6.6

Table C.9 Sampling errors: HCV prevalence by age, NAIIS 2018

Age (years)	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
TOTAL					
15-19	0.4	1,047	0.2	0.0	0.9
20-24	0.5	1,280	0.2	0.1	0.9
25-29	0.8	1,593	0.2	0.3	1.3
30-34	1.5	1,448	0.5	0.6	2.4
35-39	1.3	1,386	0.4	0.6	2.1
40-44	0.8	1,118	0.4	0.1	1.6
45-49	2.0	811	0.6	0.8	3.2
50-54	3.3	749	0.9	1.6	5.0
55-59	2.0	456	0.8	0.4	3.6
60-64	2.5	551	0.8	0.8	4.2
Total 15-24 years	0.4	2,327	0.2	0.1	0.8
Total 15-49 years	0.9	8,683	0.1	0.6	1.2
Total 15-64 years	1.1	10,439	0.1	0.9	1.4
MALES					
15-19	0.5	443	0.4	0.0	1.2
20-24	0.6	465	0.4	0.0	1.3
25-29	0.9	605	0.3	0.2	1.6
30-34	1.3	591	0.5	0.3	2.4
35-39	1.5	561	0.5	0.5	2.5
40-44	1.6	485	0.7	0.2	3.0
45-49	1.9	405	0.7	0.4	3.3
50-54	3.1	344	1.1	1.0	5.1
55-59	3.2	229	1.5	0.2	6.3
60-64	2.4	267	1.1	0.2	4.7
Total 15-24 years	0.5	908	0.3	0.0	1.0
Total 15-49 years	1.0	3,555	0.2	0.6	1.4
Total 15-64 years	1.3	4,395	0.2	0.9	1.6
FEMALES					
15-19	0.3	604	0.3	0.0	1.0
20-24	0.4	815	0.2	0.0	0.7
25-29	0.7	988	0.3	0.1	1.3
30-34	1.7	857	0.7	0.3	3.0
35-39	1.2	825	0.6	0.1	2.3
40-44	0.1	633	0.0	0.0	0.1
45-49	2.1	406	0.9	0.3	3.9
50-54	3.5	405	1.4	0.8	6.2

Table C.9 Sampling errors: HCV prevalence by age, NAIIS 2018 (continued)

Age (years)	Weighted estimate (%)	Unweighted number	Standard error (%)	Lower confidence limit (%)	Upper confidence limit (%)
FEMALES					
55-59	0.7	227	0.5	0.0	1.8
60-64	2.6	284	1.3	0.1	5.0
Total 15-24 years	0.3	1,419	0.2	0.0	0.7
Total 15-49 years	0.8	5,128	0.2	0.5	1.1
Total 15-64 years	1.0	6,044	0.2	0.7	1.3

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 Dr. Chinedu Agbakwuru, Member
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 Prof. Iliyasu Zubair, Member
 Air Cdre. Yah C Kirpu (Defence HQ), Member
 Group Capt. R Abdullahi (NAF), Member
 CP Efunsola Sowemimo (NPF), Member
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 Cdre. AS Mohammed (NN), Member
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 CSC Janada Dimas (NSCDC), Member
 Gordy Gordon (Pilgrims Africa), Member
 Ema-Olori Ayonma, Member
 Dr. Chinedu Agbakwuru, Member
 Dr. Adebobola Bashorun, Member
 Dr. Charles Nzelu, Security

United States Government

US CDC Nigeria Office

Mahesh Swaminathan, CDC Nigeria Country Director
 Deborah Conner, Deputy Country Director
 Ibrahim Dalhatu, Deputy Director for Epi/SI/Science and NAIIS Project Officer
 Solomon Odafe, Deputy Director for Program
 Ibrahim Jahun, Team Lead, Epidemiology Surveillance & Statistics
 Stacie M. Greby, Senior Technical Advisor Epi/Surveillance
 Matthias Alagi, Senior Program Specialist - Surveillance
 Victor Sebastian, Senior Program Specialist - HIV Surveillance
 Jerry Gwamna, Project Officer & Branch Chief, HIV Prevention Branch
 Dennis Onotu, Branch Chief, Continuum of Care and Treatment
 McPaul Okoye, Branch Chief, Laboratory
 Orji Bassey, Program Specialist, Laboratory
 Obinna Nnadozie, Systems Specialist, Laboratory
 Tapdiyel Jelpe, Senior Program Specialist, Laboratory
 Muhktar Ahmed, Science Lead
 Aminu Yakubu, Science Program Specialist
 Halilu Usman, Communication Specialist
 Uzoma Ene, Senior Program Specialist HIV Care and Treatment
 Victor Adamu, Program Specialist Key Populations
 Chidozie Meribe, Senior Program Specialist HTS
 Ademola Oladipo, Senior Program Specialist M&E
 Raphael Akpan, Program Specialist M&E
 Henry Debem, Program Specialist M&E
 Ifunanya Mgbakor, Program Specialist M&E
 Ayodele Fagbemi, Program Specialist Quality Assurance Management
 Mustapha Bello, Program Specialist Health Informatics
 Nguhemen Tingir, Program Specialist SIMS Coordination
 Moyosola Bamidele, Senior Program Specialist Data Analysis and Visualization
 Dickson Adegoke, Laboratory Systems Specialist
 Israel Audu, Laboratory Systems Specialist
 Odafrankhoa Oke, Laboratory Systems Specialist
 Olumide Okunoye, Laboratory Systems Specialist
 Joy Amafah, Public Health Management Specialist

Stephen Ayanlaja, Financial Analyst/Auditor
 Becky Iyoke, Senior Financial Management Analyst
 Patience Jibunoh, Associate Director for Management and Operations
 Nduka Uchechukwu, Information Systems Management Specialist
 Victor Ajayi, ICT Server Lead
 Philip Egbo, IT Assistant

Other PEPFAR Nigeria Team
 Mark Giambrone PEPFAR Coordination Office
 Shirley Dady PEPFAR Coordination Office
 Murphy Akpu PEPFAR Coordination Office
 Margaret Shelleng PEPFAR Coordination Office
 Otse Ogorry PEPFAR Coordination Office
 Robert Nelson WRP-N
 Yakubu Adamu WRP-N
 Ifeanyi Okoye WRP-N
 Aminu Suleiman WRP-N
 Annie Chen USAID
 Atobatele Akinyemi USAID
 Simon Enajedu USAID
 Amobi Onovo USAID
 US Department of State staff

US CDC Atlanta Office

Wolfgang Hladik, Branch Chief, Epidemiology and Strategic Information Branch
 Andrew Voetsch, Epidemiologist
 Aderonke Ajiboye, Epidemiologist (Contractor)
 Kristin Brown, Health Scientist
 Megan Bronson, Epidemiologist
 Gregory Chang, Surveillance
 Nikhil Kothegal
 Stephen McCracken, Statistician Demographer
 Anne McIntyre, Epidemiologist
 Daniel B. Williams, Epidemiologist
 Linda Fleming, Deputy Branch Chief
 Bharat Parekh, Research Microbiologist
 Joy Chih-Wei Chang, Microbiologist
 Joshua DeVos, Biologist
 Nnaemeka Iriemenam, Microbiologist
 Kathryn Lupoli, Microbiologist
 Hetal Patel, Biologist
 Sehin Birhanu, Biologist
 Floris Wray-Gordon, Microbiologist
 Ernest Yufenyuy, Microbiologist
 Jacqueline Petty, Communications Specialist
 Cassandra Jackson, Public Health Advisor
 Anne F. Williams
 Woolfork Makhabele, Epidemiologist

University of Maryland, Baltimore, Headquarters

Man Charurat, Global Director, Ciheb; University of Maryland, Baltimore; School of Medicine
 Alash'le Abimiku, Senior Lab Advisor
 Talishiea Croxton, Lab Technical Advisor
 Joyce Johnson, HQ Coordinator
 Mirna Moloney, Lead Data Analyst
 Habib Omari, Senior Data Analyst

Jibreel Jumare, Data Advisor
 Andrew Mitchell, Data Analyst
 Ashley Shutt, Regulatory Advisor
 Sheri Sylvester, Travel
 Lana Cohen, Country Team Management
 Kristen Stafford, Senior Epidemiologist
 Stephen Ohakanu, Health Informatics

University of Maryland, Baltimore, Nigeria Management

Dr. Aliyu Gambo Gumel, COP/Project Director
 Dr. Bola Gobir, Country Director

Project Management

Mercy P. Niyang, Director Project Management
 Chuji Olinze, Associate Director, SCMS Logistics
 Bolu Awesu, Associate Director, SCMS Procurement
 Uzoabaka Tobechukwu, HSCMS Officer
 Andeyaba Danladi, HSCMS Officer
 Fauziya Garba, HSCMS Administrative Assistant
 Bamidele Samuel Adetola, Warehouse Officer
 Henrietta Tiri, Human Subjects Compliance
 Tersu Asabe Ohunayo, Office Manager
 Ema Olori-Ayonmagbemi, Project Management Officer
 Ahmed Aisha, Project Management Officer, Secretary to the COP

Administrative Staff

Julie Ojo, Director Finance, Administration and Compliance Oversight
 Adewale Dare, Accounting and Expenditure Review and Reporting
 Adeniyi Ogunyemi, Grants & Compliance Manager (GCM)
 Solomon Ailewon, Human Resource Manager
 Suzan Uzoka, Procurement & Procedural Procurement Management
 Shola Balogun, Training Officer
 Seyi Efuntoye, Training Officer
 Bonaventure Ikeh, Administration and Logistics
 Agatha Akpaka, Administrative Assistant & Front Desk
 Nwamaka Atuchukwu, Administrative Assistant & Front Desk
 Ali Shehu, Driver
 Frank Alabi, Driver
 Sunday Joseph, Driver
 David Taiwo Ojo, Driver
 Mohammed Aliu, Driver
 Aliyu Idris, Driver
 Ahmed Lawal, Project Accountant
 Jonathan Kassam, Procurement Officer
 Valentine Akombo, Finance & Compliance Officer
 Ifeatu Ajaegbo, Training Officer
 Bomi Awesu, HR Manager
 Michael Niyang, Finance and Logistics Officer
 Esther Onyia, Finance and Logistics Officer
 Hauwa Mohammed, Finance and Logistics Officer
 Umar Muhammad, Finance and Logistics Officer
 Oluwafumike Otaru, Finance and Logistics Officer
 Balkisu Sule, Finance and Logistics Officer

Survey Methods and Data Management

Adedayo Adeyemi, Director, Survey Methodology and Data Systems
 Stephen Ohakanu, Data Systems Lead
 Charles Ogbonna, Technical Designer & Architecture of Systems
 Sonia Ochanya Ogbeh, Systems Coding and Development
 Chukwuka Johnbosco Ezekwu, Systems Coding and Development
 Seun Aremu, Andriod Application Development
 Greg Omebjie, CSPro Analyst
 Rukevwe Aliogo, Geographic Information System Mapping and Listing/Project Monitoring
 Sunday Ikpe, Systems & Infrastructure Support at Central Office and with Zonal IT Officer
 Alhassan Abdulkadir, Systems & Infrastructure Support at Central Office and with Zonal IT Officer
 Emeka Onovo, IT Support Central Office
 Ahmed Nasidi, IT Support Central Office
 Christiana Ikemeh, Survey & Lab Data Quality Assurance Lead
 Ibrahim Babaja Manu, Survey & Lab Data Quality Assurance Officer
 Aliyu Ahmed, Survey & Lab Data Quality Assurance Officer
 Tina Adesina, Survey Data Monitoring and Quality Coordinator
 Gerald Oraegbu, Linkage to Care data Officer
 Akipu Ehoche, Data Analysis and Daily Survey Situation Reporting
 Sandra Ozordi, Real-time Data Monitor
 Chima Nwadike, Real-time Data Monitor
 Oluwasanmi Nelson Ogedengbe, Real-time Data Monitor
 Judith Nneka Umeh, Real-time Data Monitor
 Adesola Adepoju, Real-time Data Monitor
 Gladys Antonza, Real-time Data Monitor
 Adeniji Tobi, Real-time Data Monitor
 Bisola Lawal, Real-time Data Monitor
 Chika Ukenedo, Real-time Data Monitor
 Favor Makava, Real-time Data Monitor
 Oluchi Emea, Real-time Data Monitor
 Damilola Agboola, Real-time Data Monitor
 Mubo Lawal, Real-time Data Monitor
 Martins Onyemaobi, Real-time Data Monitor
 John Bisong, Real-time Data Monitor
 Stephen Balogun, Real-time Data Monitor
 Krystal Anyanwu, Real-time Data Monitor
 Paul Egharevba, Real-time Data Monitor
 Adeniyi Mylin, Real-time Data Monitor
 Nnabundo N. Musei, Real-time Data Monitor
 Mirian Ajoko, Real-time Data Monitor
 Kafayat Abdulrazak, Real-time Data Monitor
 Ismaila Musa, Real-time Data Monitor
 Abduljalil Bashir, Real-time Data Monitor
 Odina Eveshoyan Amos, Real-time Data Monitor
 Halima Raji, Real-time Data Monitor
 Phillip Pam, Real-time Data Monitor
 Tosin Bello, Real-time Data Monitor
 Oriabure Esther, Real-time Data Monitor
 Christine Omounumuemu-Okpe, Real-time Data Monitor
 Michael Adeoye, Real-time Data Monitor
 Hyeladzirah Shalangwa, Real-time Data Monitor
 Kasham Eunice Kyangama, Real-time Data Monitor

ICF

Leo Ryan, Senior Advisor
 Jasbir Kaur, Project Director
 Geoffrey Greenwell, Senior Advisor Data Management
 Mario Vaisman, Senior Programmer
 Genevieve Dupuis, Data Management Expert
 Fabrice Nkodo, Field Quality Control Expert
 Mahmoud Elkasabi, Senior Sampling Statistician
 Geofrey Lutwama, Programmer
 Dumitru Silitrari, Quality Control Expert
 Fidele Mutima, Data Editing Expert

AFENET (Community Mobilization)

Dr. Patrick Nguku, AFENET Regional Coordinator
 Dr. Adebobola Bashorun, Director, Advocacy, Communication Community & Social Mobilization
 Dr. Maureen Kamateeka, Field Coordinator
 Emmanuel Adekola Obaloluwa, Information Systemand Info-graphics Specialist
 Abdullahi Hamza Hassan, TA/Coordinator North West & North East
 Ayodele Alegbeleye, TA/Coordinator South West & South East
 Dahiru Hudu Musa Ii, TA/Coordinator North Central & South South
 Iorkase Oliver, Media Specialist
 Oteyolanu Oluwatosin, Communication Officer (UMB)
 Shuaibu Kafin Gana, Zonal Mobiliser North West
 Anayo Ernie Ozowuba, Zonal Mobilizer South South
 Nakoto Esther Useni, Zonal Mobilizer North Central
 Nurein Abdulfatah Shitu, Zonal Mobilizer North East
 Dr. Olubumi Ayinde, Zonal Mobilizer South West
 Dim Osinachi Priscillia/Edith Onwuka, Zonal Mobilizer South East
 Walter Ugwuocha, Civil Society Linkage Officer
 Ohuabunwa Humphrey Chinonye, Mobilization Assistant
 Chinwe Achugamonye, Mobilization Assistant
 Nazir R. Ali, NC Zonal IT Officer
 Mikhail Abubakar (NW), North West Zonal Lab Coordinator
 Salisu Muhammad Fahad, Support
 Hamza Abdullahi Hassan, Technical Assistance/Zonal Coordinator, North West & North East

University of Washington

Herbie Duber, Sub-award PI
 Laura Dwyer-Lindgren, Co-investigator
 Casey Johanns, Program Manager
 Krista Steuben, Research Scientist

NAIIS Mapping and Listing NPOPC Team

Dr. Usman Kolapo, National Coordinator
 Titilayo Hammed, Asst. Coordinator
 Bamidele Sadiku, State Coordinator
 Folami Muka Ayinla, State Coordinator
 Oluwole Femi, State Coordinator
 Dauda Alimi, State Coordinator
 Balogun Babalola Titilayo, State Coordinator
 Folorunso Tajudeen Kunle, State Coordinator
 Saturday Ekeoba, State Coordinator
 Inengite Sam David, State Coordinator

Lotobi Godwin, State Coordinator
 Izulu Bara, State Coordinator
 Ukpai Kanu, State Coordinator
 Thompson Solomon, State Coordinator
 Ulasi Okwochukwu Joachin, State Coordinator
 Ojukwu Paulus Chukwu, State Coordinator
 Kalu Ugochukwu, State Coordinator
 Festus Chiwetalu Agu, State Coordinator
 Magnus Osuji, State Coordinator
 Inuwa Abdullahi Jatau, State Coordinator
 Magaji Aliyu, State Coordinator
 Ado Mamman, State Coordinator
 Garba Salisu Musa, State Coordinator
 Salisu Bisallah Kangiwa, State Coordinator
 Ado Usman, State Coordinator
 Ahmed Galadima, State Coordinator
 Isyaku Mohammed Yakubu, State Coordinator
 Innocent Mishikir, State Coordinator
 Hinna Abubakar, State Coordinator
 Andy Jediel, State Coordinator
 Bashir Isa, State Coordinator
 Idris Abubakar Mohammed, State Coordinator
 Adepoju Emmanuel Adeyemi, State Coordinator
 Ayuba Isa, State Coordinator
 Mohammed Sulaiman, State Coordinator
 Vendip Nankap, State Coordinator
 Abubakar Saidu, State Coordinator
 Ibrahim Mohammed, State Coordinator
 Maidu Sulaiman Zakariyau, State Coordinator
 Uthman Omoniyi Abdulazeez, Data Manager/Programmer
 Suberu Mohammed Jamiu, Logistics Officer/Data Validator
 Abraham David, Data Validator
 Evelyn Micah, Data Validator
 Tolu Oladun, Data Validator
 Kemi Aminu, Data Validator

Field Implementation Team

Chinedu Agbakwuru, Director Field Implementation
 Baffa Sule Ibrahim, Field Team Tech Advisor (NW, NE)
 Ibrahim Dangana, Field Team Tech Advisor (SW, NC)
 Emem Iwara, Field Team Tech Advisor (SE, SS)
 Ishaq Saidu, HIV Lead Linkage to Care Coordination
 Ibrahim Ahmed El-Imam, Linkage to Care Coordinator

North Central Zone

Musa Abdullahi Zonal Coordinator
 Yahaya Aliyu Lamino, Sub-zonal Coordinator
 Samuel Odeh, Sub-zonal Coordinator
 Abdul-Mumini Ahmed, Sub-zonal Coordinator
 Babatunde Yusuf Adiama, Zonal Linkage to Care

North East Zone

Garba Danjuma, Zonal Coordinator
 Rasheeda Ahmed Al-Mustapha, Sub-zonal Coordinator
 Dauda Musa Bage, Sub-zonal Coordinator
 Betty Kathy Garba, Zonal Linkage to Care

North West Zone

Umar Tanko Yakasai, Zonal Coordinator
 Muhd Bello Garba, Sub-zonal Coordinator
 Ibrahim Garba Bichi, Sub-zonal Coordinator
 Sagir Muhd Auwal, Sub-zonal Coordinator
 Hafsat Ahmed Muazu, Zonal Linkage to Care

South East Zone

Nwene Ejike Kenneth, Zonal Coordinator
 Uchechukwu Efifie, Sub-zonal Coordinator
 Chibuzor Morah, Sub-zonal Coordinator
 Judith Adimora Anyawu, Zonal Linkage to Care

South South Zone

Paul Akhigbe, Zonal Coordinator
 Abasi-ubong Attah, Sub-zonal Coordinator
 Okon Ubong Akpan, Sub-zonal Coordinator
 Ben Ewezu Ekpezu, Zonal Linkage to Care

South West Zone

Babalola Olufemi, Zonal Coordinator
 Abayomi Olufemi, Sub-zonal Coordinator
 Bisola Adebayo, Sub-zonal Coordinator
 Richard Ugbena, Zonal Linkage to Care

Zonal IT

Nazir R. Ali, Zonal IT Officer North Central
 Msoo Gber, Zonal IT Officer North Central
 Amina Mohammed, Zonal IT Officer North Central
 Ahmad Sylvanus (NE), Zonal IT Officer North East
 Usman Mohammed, Zonal IT North East
 Alkali Musa, Zonal IT Officer North East
 Ibrahim Yerima Balla (NW), Zonal IT Officer North West
 Nuraini Usman, Zonal IT Officer North West
 Yusuf Shehu, Zonal IT Officer North West
 Henry Otuadinma (SE), Zonal IT Officer South East
 Ernest Chukwunta, Zonal IT Officer South East
 Anetor Ofoghor Ehimhanre, Zonal IT Officer South East
 Ekarika Idara Brown, Zonal IT Officer South South
 Aniebiet Ebong, Zonal IT Officer South South
 Chibuzor Anyaegbulam, Zonal IT Officer South South
 Imoh Jackson, Zonal IT Officer South South
 Ismail Olaniyan (SW), Zonal IT Officer South West
 Michael Aliu, Zonal IT Officer South West
 Tobi Ajayi, Zonal IT Officer South West

Field Staff

South South Zone

Ekpo Lucy, Team Lead
 Alfred Inebi Kelly, Interviewer
 Paul Samson, Interviewer
 Obiukwu Clara, Counsellor
 Aruna Aweni, Counsellor
 Omuruka Sweeten, Field Laboratorian
 Chukwumati Igochi, Field Laboratorian
 Udoh Anietie Johnson, Team Lead
 Mark Inara Isaac, Interviewer
 Bassey Sylvia Cyril, Interviewer
 Takwan Margaret, Counsellor 2
 Osagie Ivie Mary-Jane, Counsellor
 Jaja Imiegbam, Field Laboratorian
 Abba Margaret Lucky, Field Laboratorian
 Akpan Etop Patrick, Team Lead
 Oguchi Alex Kene, Interviewer
 Bassey Joy Ekpo, Interviewer
 Onodje Franca Akpevwe, Counsellor
 Gabriel-Akibi Gold Uduak, Counsellor 1
 Ogeyeme Vincent, Field Laboratorian
 Enofe Patience Nnoma, Field Laboratorian

Udoh Esther Emmanuel, Team Lead	Eyoh Faith Vincent, Counsellor
Biate Azibataram, Interviewer	Ozah Evare, Field Laboratorian
Ereyimwen Precious Okunede, Interviewer	Madu Amakuro Azibanizoloman, Field Laboratorian
Ajuebor Webube Cynthia, Counsellor	Anastasia Ikilishi Isika, Team Lead
Elo Ogundipe, Counsellor	Sinibuen Onoriode, Interviewer
Nosakhare Sylvester, Field Laboratorian	Tom-Abio Maudline, Interviewer 2
Ehigbor Patience Ziegbe, Field Laboratorian	Woseley Belema, Counsellor
Michael Emmanuel Ikpe, Team Lead	Ibiok Enobong Justin, Counsellor
Onukho Evelyn Joseph, Interviewer	Maurice Nsemo, Field Laboratorian
Iwara Omini Iki, Interviewer	Ibegi Blessing Tarimoboere, Field Laboratorian
Peter Mary, Counsellor	Ekpenyong Francis Bassey, Team Lead
Okon Essienawan, Counsellor 2	Ottu Mfonobong Smart, Interviewer
Modjota Ezekiel Oke, Field Laboratorian	Aigbogun Precious, Interviewer
Enyindah Confidence, Field Laboratorian	Ichendu Vigachima Nwinle, Counsellor
Egharevba Ita Esele, Team Lead	Uquang Margaret Idorenin, Counsellor
Uchenna Anokwuru, Interviewer 1	Orbisi Jennifer, Field Laboratorian
Bassey Margaret Ekpo, Interviewer 2	God bless Pelesai, Field Laboratorian
Aghedo Ojore Godday, Counsellor	Ayaraekpe George, Team Lead
Okah Ibuchim Joy, Counsellor	Ugwuocha Uka P, Interviewer
Onah Esther, Field Laboratorian	Ogbusua Nneoma Gift, Interviewer
Ibekwe Anibet James, Field Laboratorian	Woyike Odinaka, Counsellor
Akusulfiezibe Okeoghene, Team Lead	Akrah Mercy David, Counsellor
Cobham Lynda Ene, Interviewer 1	Gbara Barisi, Field Laboratorian
Okoi Effiom Ubi, Interviewer 2	George Aniekemene Samuel, Field Laboratorian
Oparaodu Jane Uche, Counsellor	Okpogoro Omonoro Ernest, Team Lead
Eke Peace, Counsellor	Omoredbee Chesley Gregory, Interviewer
Aghagha Ejiro, Field Laboratorian	Idiaghe Gloria Ehis, Interviewer
Umoinyang Imamfon Edidiong, Field Laboratorian	Mboho Nsisong Ekom, Counsellor
Tebeda Bountain Welcome, Team Lead	Ezekiel Ayebatari Ayebatonbara, Counsellor
Sunday Runyi Inah, Interviewer	Joshua Glory Etiowo, Field Laboratorian
Nkpanam Nora Umo, Interviewer	Okon Bassey, Field Laboratorian
Ezomo Olohimai Pearl, Counsellor	Allotey Cynthia Adukwi, Team Lead
Emmanuel Josephine Oyibo, Counsellor	Odiakaose Nelly, Interviewer
Ogban Onyi, Field Laboratorian	Monyei Christopher Ifechukwude, Interviewer
Udeme Peter, Field Laboratorian	Nwawo Michael Nse, Counsellor
Ockri Ayibakuro Fidelis, Team Lead	Okuoimose Iguehide Monica, Counsellor 1
Emuren Kenneth Ekirigbimo, Interviewer 1	Akpofure Cyril, Field Laboratorian
Ntul Andrew Ekpung, Interviewer 2	Oparaodu Chinwe Rosemary, Field Laboratorian
Onosakponome Passion Oghale, Counsellor	Adu Matthew Eturhobore, Team Lead
Ita Christiana Precious, Counsellor	Osayande Faith Imuetinyan, Interviewer
Nsan Elvis Charles, Field Laboratorian	Owhonda Christian, Interviewer
Annagrace Nnadi, Field Laboratorian	Nwazunku Uchenna Alugbala, Counsellor
Okon Nyakno-Obong Efeefiong, Team Lead	Okara Tariye Godslove, Counsellor
Bassey Esuh Joseph, Interviewer	Timipa Afadu, Field Laboratorian
Eremi Daniel Ekpe, Interviewer	Ekpeyong Edet Nse, Field Laboratorian
Esene Onuwa Lydia, Counsellor	Erharhagen Onoriode Justin, Team Lead
Onwuegbuchi Angela Oluchi, Counsellor	Ohiomah Ajayi, Interviewer
Odey Mary, Field Laboratorian	Patrick Callistus, Interviewer
Paul Umudide, Field Laboratorian	Ekanem Nsisong David, Counsellor
Okim Precious Onyedikachi, Team Lead	Ugbe Perpetual Ukaye, Counsellor
Orage Nuka Julius, Interviewer	Iyetu Baribefe, Field Laboratorian
Jack Arimoniya Richmond, Interviewer	Ebieriumini Faith Opuofoni, Field Laboratorian
Afirimma Lediolo Sorbari, Counsellor	Thompson Nsima Sylverster, Team Lead
Ibanga Aniebietobong Nsikanabasi, Counsellor	Alisigwe Nkeruka, Interviewer
Esido Tungbowei Miegbenwo, Field Laboratorian	Ebenezer Ann, Interviewer
Uzezi Egwey, Field Laboratorian	Inyang Ntiense, Counsellor
Iwara Nkechinyere Norah, Team Lead	Ogregade Bubaraye Ruth, Counsellor
Omubo Grace, Interviewer	Lambert Iruosoumoye Precious, Field Laboratorian
Mathew Mercy Hannah, Interviewer	Asanga Ubong Ilme, Field Laboratorian
Nwibiabu Kuebari Zion, Counsellor	Agwai Chukwudi, Team Lead

Akupue Michael Chukwuma, Interviewer
 Akpainyang Udeeme Godwin, Interviewer
 Erho Esther Ufuoma, Counsellor
 Alabi Joshua Oluwakayode, Counsellor 2
 Amakiri Theophilus Chiwokwanim, Field Laboratorian
 Onaiwu Ose Becky, Field Laboratorian
 Fere Ebisindei David, Team Lead
 George Stephen, Interviewer
 Ita Esther Otu, Interviewer
 Neki Oyeindiepreeye Abel, Counsellor
 Onyedilefu Chidiebere Kennedy, Counsellor
 Ndifreke Asuquo Sylvester, Field Laboratorian
 Atu Anita Otegiri, Field Laboratorian
 Oniovokor Bright Ejakporvi, Team Lead
 Tunde Precious Mary, Interviewer
 Imeh Mbuotidem Ikpe, Interviewer
 Agba Cecilia, Counsellor 2
 Etuk Esther Okon, Counsellor
 Imoudi Omoze Jennifer, Field Laboratorian
 Ogene Justice, Field Laboratorian
 Etinosa Okankan Efosa Paul, Team Lead
 Isaiah Victoria Mac-Moses, Interviewer
 Effiong Andrew Edet, Interviewer
 Mgbe Elizabeth Muan, Counsellor
 Appah Isaac Biboye, Counsellor
 Iragunima Joseph, Field Laboratorian
 Uzoamakalrene Catherine, Field Laboratorian
 Dede Alfred Ayibannaghami, Team Lead
 Gboelo Beete Blessing, Interviewer
 Ekaobong Aniefiok Idongesit, Interviewer
 Amaran Tokoni Gladys, Counsellor
 Oboku Diimiari Amavie, Counsellor
 Odia Itua Daniel, Field Laboratorian
 Bassey Etta, Field Laboratorian
 Akaninwor Manuchimso Charles, Team Lead
 Elijah Goodness Asuquo, Interviewer
 Dikibo Ebiteme Shulammite, Interviewer
 Esek Igwe Augustine, Counsellor
 Akaninwo Moseph Israel, Counsellor
 Ukpong Daniel, Field Laboratorian
 Utibe-Abasi Alfred, Field Laboratorian
 Amadi-Okere Precious, Team Lead
 Udofia Andrew Sampson, Interviewer
 Ikoko Bomunu Samuel, Interviewer
 Ogar Takim Obi, Counsellor
 Ashiriba Joan, Counsellor
 Etim Nsikak Godwin, Field Laboratorian
 Akpan Aniedi, Field Laboratorian
 Williams Precious Okon, Team Lead
 Eyo Otu-Ita Otu, Team Lead
 Omubo Dorcas, Interviewer
 Onyekwena Onyema Benjamin, Counsellor
 Emordi Francis, Counsellor
 Zenebo Vivian Cabby, Field Laboratorian
 Otatane-Oso Friday Francis, Field Laboratorian
 Uzosike Tondor Jumbo, Team Lead
 Umo Emem Effiong, Interviewer
 Iyoha David Nelson, Interviewer
 Ekure Atim Egbe, Counsellor
 Obiagwu VivianBen, Counsellor
 Tanen Barinaakerenew Mankie, Field Laboratorian
 IgbuaniAkigbe Emmanuel, Field Laboratorian
 Otelimabia Deinma George, Team Lead
 Edem Dominica Hanson, Interviewer
 Zebedee Florence, Interviewer
 Bassey Faith Edet, Counsellor
 Osakwe Uche Daniels, Counsellor
 Arikpo Itam Oyira, Field Laboratorian
 Ugochi Valerie Esame, Field Laboratorian
 Asuquo Unyime, Interviewer
 Okoli Augustina Ifeyinwa, Interviewer
 Elue Joel Elozoanam, Interviewer
 Obakpolor Cynthia, Counsellor 1
 Okwuesum Onyemah, Field Laboratorian
 Utibe Maurice Isong, Field Laboratorian
 Abbas Nurudeen, Team Lead
 Okpalaji Kenechi Fransica, Interviewer
 Zik Irene, Interviewer
 Otobrise Emmanuel, Counsellor
 Archibong Harrison Joseph, Counsellor
 Victor Omote, Field Laboratorian
 Jilaga Amarachi Theresa, Team Lead
 Chukwuemeka Nkem Augustine, Interviewer
 Erebor Owie Prince, Interviewer
 Ashefor Michael, Counsellor
 Odey Buke-Uyim Ashia, Counsellor
 Uduehe GloryEmmanuel, Field Laboratorian
 Ezekwe Nnamdi Francis, Team Lead
 Isreal Ovie Lucky, Interviewer
 Mordi Ebube, Interviewer
 Obah Godwin Oghenemano, Counsellor
 Stephen UbohoNse, Field Laboratorian
 Okon Orok Effiong, Field Laboratorian
 Obaji Samuel Missang, Team Lead
 Ahuruonye Nancy Chidera, Interviewer
 Osadolor Frank, Interviewer
 Osayande Christopher Friday, Counsellor 1
 Nwakwuribe-Mayor Aisioma, Counsellor
 Ajie Ronald, Field Laboratorian
 Ikirigo Jeremiah, Field Laboratorian

South East Zone

Okpe Barthlomen Johnbosco, Team Lead
 Chisom Amuta H, Interviewer
 Dimeke Chibueze O., Interviewer
 Mbakaogu Uchechi Jennifer, Counsellor
 Chukwuani Orji Obinna, Counsellor
 Oti Egwu Joshus, Field Laboratorian
 Chineke Judith Ada, Field Laboratorian
 Achikanu Julius Ovomijieje, Team Lead
 Ebeb Stella Obianuju, Interviewer
 Ojukwu Kodili, Interviewer
 Ndulue Chidinma Helen, Counsellor
 Chukwu Igwebuike F, Counsellor
 Nwibio Anthony Odada, Field Laboratorian
 Onyia Henrietta, Field Laboratorian
 Nwodoh Cornelius Chinonso, Team Lead
 Okonkwo Chisom Adela, Interviewer
 Olumba FrancisA., Interviewer
 Onwuka Nnena Helen, Counsellor
 Olier Oscar O, Counsellor

Anojulu Amara Anulika, Field Laboratorian
 Ugwu Prince Ifeji, Field Laboratorian
 Nwanya Emmanuel, Team Lead
 Amuta Peace C, Interviewer
 Onugwu Anthony Udoka, Interviewer
 Onwuanuogu Jennifer Amarachi, Counsellor
 Ikechukwu Philip I, Counsellor
 Ihedioha Leonard Ogueri, Field Laboratorian
 Nnaji Ebere Mary, Field Laboratorian
 Mba Austn, Team Lead
 Obiora Udochchi Onuabuchi, Interviewer
 Ikeokafor Ikechukwu, Interviewer
 Ukwuoma Eucharia Chidinma, Counsellor
 Anyanwu Obinna, Counsellor
 Alor Chukwunonso Godson, Field Laboratorian
 Nwosu Chidinma, Field Laboratorian
 Ononigwe Pius, Team Lead
 Nnodum Nneka, Interviewer
 Ezema Godwin Uchenna, Interviewer
 Ibeh Chioma Lilian, Counsellor
 Nwoye Charles, Counsellor
 Alachedo Chetachi Blessing, Field Laboratorian
 Ezugwu Ifeanyi Christopher, Field Laboratorian
 Okafor Izuchukwu Peter, Team Lead
 Onyewuchi Chidinma Peace, Interviewer
 Duru Ebelechukwu Eric, Interviewer
 Urom Stanley O, Counsellor
 Nwitte-Eze Chidinma, Counsellor
 Uzor Precious Nneoma, Field Laboratorian
 Nwankwo Obiora Everest, Field Laboratorian
 Metu Kingsley Chudi, Team Lead
 Abiahu Ozindu P, Interviewer
 Agu Sunday Uche, Interviewer
 Anna Uzoamaka Obinna, Counsellor
 Adinobi Doris Chinedu, Counsellor
 Agwu Vivien, Field Laboratorian
 Aguba Tochukwu, Field Laboratorian
 Ogbonna Ngozi Linda, Team Lead
 Iziogo Paulinus Ulegu, Interviewer
 Ofoedu Judith Tochukwu, Interviewer
 Anusionwu Bernardine, Counsellor
 Onyibe Chukwuemeka, Counsellor
 Ezieke Michael Ogbu, Field Laboratorian
 Udu Leonard, Field Laboratorian
 Igbanu Uchendu Charles, Team Lead
 Okafor Ebele Victoria, Interviewer
 Nwachukwu Osinachi Mark, Interviewer
 Ikeagwulonu Chidinma Jennier, Counsellor
 Ozoemena Vitalian Amobi, Counsellor
 Ude Ugomma, Field Laboratorian
 Chiekezie Kingsley, Field Laboratorian
 Nwawkwo Solomon F, Team Lead
 Ezeogo JulianalU, Interviewer
 Ezugwu Boniface Nwachukwu, Interviewer
 Amalah Stanly, Counsellor
 Ibemesi Hilary Emeka, Counsellor
 Ofokansi Chinenyen Helen, Field Laboratorian
 Okorie Cheche Kalu, Field Laboratorian
 Archi Chinweoke Doris, Team Lead
 Ebegbulam Mercy Eberechi, Interviewer
 Obiora Michael Uche, Interviewer
 Kalu Kelechi Arua, Counsellor
 Chukukere Nneoma U, Counsellor
 Isielu Rufina Chidiebere, Field Laboratorian
 Obika Patrick Chukwunonso Kingsley, Field Laboratorian
 Ifeoma Onye Kachi-Umah, Team Lead
 Chimezie Jennifer Chinaza, Interviewer
 Anikwe Chinedu, Interviewer
 Alaribe Chidinma Uloma, Counsellor
 Atuchukwu Chisom Ikenna, Counsellor
 Ben-Anioke Blessing, Field Laboratorian
 Nkwuda Theophilus, Field Laboratorian
 Orih Ndidi Blessing, Team Lead
 Odume Henry Chijioke, Interviewer
 Elo Peter Ikenna, Interviewer
 Alabson Ikunna Ngozi, Counsellor
 Emeonye Odochchi Peace, Counsellor
 Nweke Uchechukwu, Field Laboratorian
 Egbeaso Amarachi, Field Laboratorian
 Nweke Victor Onyedikchi, Team Lead
 Chukwuemeka Maryann Uchechi, Interviewer
 Ejidike Ngozi Jane, Interviewer
 Akwolu Chinene Cynthia, Counsellor
 Awujobi Evelyn Oluchi, Counsellor
 Chukwumaeke Victor C, Field Laboratorian
 Ibe Chinwe, Field Laboratorian
 Chimezie Nwodo Christopher, Team Lead
 Nwakpkpa Elijah, Interviewer
 Ezeibe Maureen, Interviewer
 Aneke Nnenna Sylvia, Counsellor
 Ebere Rita Chikwelu, Counsellor
 Okafor Ifeanyi Darlington Austin, Field Laboratorian
 Abugu Chisom Blessing, Field Laboratorian
 Okafor Chioma Clare, Team Lead
 Nwanna Charity Ekeoma, Interviewer
 Ugbor Emeka Godwin, Interviewer
 Onyia Chisom Maureen, Counsellor
 Onuigbo Kenechi Mercy, Counsellor
 Osuoha Chinyere Beatrice, Field Laboratorian
 Ndubuisi Nonso Thankgod, Field Laboratorian
 Uzodike Celestine Nkem, Team Lead
 Nwaokoro Maureen Njideka, Interviewer
 Ohuabunwa James, Interviewer
 Eziekwe Miracle Oluchukwu, Counsellor
 Nduka Agwu Chinyere, Counsellor
 Mba Blessing Uma, Field Laboratorian
 Manuba Chukwuka Michael, Field Laboratorian
 Uzowuru Adaku Glory, Team Lead
 Okonkwo Chika Ndubuisi, Interviewer
 Obaji Modesta Chinasa, Interviewer
 Ihekanandu Ure Onyinye, Counsellor
 Egbo Chidinma Peace, Counsellor
 Nwaebonyi BenjaminC., Field Laboratorian
 Opara Chinwendu Jane, Field Laboratorian
 Anyikire Mercy Chinyere, Team Lead
 Maduako Emmanuel U, Interviewer
 Urom Anuri Joy, Interviewer
 Mbah Chidinma, Counsellor
 Igwenagu Manfred O, Counsellor
 Nnamchi Onyebuchi Innocent, Field Laboratorian

Eziama Sandra, Field Laboratorian
 Ibeme Chinenye Miriam, Team Lead
 Nwofia Ukamaka Jessica, Interviewer
 Orji Genevieve Ann, Interviewer
 Onyedilefu GideonChijindu, Counsellor
 Onyiriuka Michael C, Counsellor
 Obani Kenneth Onyedikachi, Field Laboratorian
 Okorie Ruth Noni-Daniel, Field Laboratorian
 Uzim Elochukwu Ernest, Team Lead
 Chizoba Obidigbo-Egbo, Interviewer
 Nwankwo Chisom Lilian, Interviewer
 Unachukwu Uchenna David, Counsellor
 Iro Chinedu, Counsellor
 Ohara Anthony Nduejuafu, Field Laboratorian
 Okoye Ifeoma Marycynthia, Field Laboratorian
 Adindu Chizaram Constance, Team Lead
 Ngaji Chijioke Christian, Interviewer
 Iroegbu Obinna Charles, Interviewer
 Okpara Anthonia, Counsellor
 Omaka Nkechi Oji, Counsellor
 Eze Osmond Obinna, Field Laboratorian
 Agu Grace Jane, Field Laboratorian
 Akabuike Nkiruka Maria, Team Lead
 Elebe Chidinma Prisca, Interviewer
 Okafor Uchenna Ckukwuma, Interviewer
 Nwabuisi Bolanle Oluwakemi, Counsellor
 Chime Chinyere Cecilia, Counsellor
 Adighogu Obioma Oluchi, Field Laboratorian
 Nwankwo Onyinye Akpa, Field Laboratorian
 Nnaji Henry Chinedu, Team Lead
 Nwali Chukwuemeka E., Interviewer
 Abia-Onyike Jane Chinecherem, Interviewer
 Onyebueke Goodluck Chiemela, Counsellor
 Ogbonnaya Betty Ogechi, Counsellor
 Egbe Ogechukwu Blessing, Field Laboratorian
 Eziakor Olisa Eloka, Field Laboratorian
South West Zone
 Sunday Babajide Opeyemi, Team Lead
 Isedowo Oluwaseyi Olabimpe, Interviewer 1
 Ogunjimi Olayemi Babatunji, Interviewer 2
 Acholonu Gloria Chinonso, Counsellor 1
 Oguntuberu Femi, Counsellor 2
 Folorunso Boluwatife, Field Laboratorian 1
 AwedaAminat, Field Laboratorian 2
 Adeola-Musa Oluwatoyin Omolara, Team Lead
 Otulana Olugbenga Adeniyi, Interviewer 1
 Tairu Adewale Bamidele, Interviewer 2
 Ogundola Oluwadunsin Ore, Counsellor 1
 Akinfemisoye Omokunle Olufemi, Counsellor 2
 Popoola Rasheedah, Field Laboratorian 1
 Omoloye Olawale Tolulope, Field Laboratorian 2
 Ojo Oreoluwa Oluwafunke, Team Lead
 Bello Fausat Adenike, Interviewer 1
 Sodipo Olalekan, Interviewer 2
 Olowookere Josephine Olu, Counsellor 1
 Olatuja Dayo Moses, Counsellor 2
 Effiong Chizuroke Deborah, Field Laboratorian 1
 Dada John Olusegun, Field Laboratorian 2
 Onifade Oluwaseun Samuel, Team Lead
 Ajayi Oluwabusayo Omolade, Interviewer 1
 Owadokun Babatope Akintayo, Interviewer 2
 Nwogwugwu Ugochukwu, Counsellor 1
 Mayunge Temidayo Saidat, Counsellor 2
 Olasunkanmi Abe Joseph, Field Laboratorian 1
 Segun-Oladoye Moromoke, Field Laboratorian 2
 Ezeani Esu Uleator, Team Lead
 Adeyemo Omolara Tinuade, Interviewer 1
 Tairu Oluwaseyi Adams, Interviewer 2
 Ajibola Omolola Florence, Counsellor 1
 Babalola Gbenga Jocob, Counsellor 2
 Adegbeye Adesola Folakemi, Field Laboratorian 1
 Ajileye Ayodeji Blessing, Field Laboratorian 2
 Maduekwe Emmanuel Chidozie, Team Lead
 Iseyemi Olajumoke Folasade, Interviewer 1
 Olanipekun Seyi Olalekan, Interviewer 2
 Imonitie Oluwafunmilayo Elizabeth, Counsellor 1
 Anjorin Oluwatoyin Esther, Counsellor 2
 Akindele Damilola, Field Laboratorian 1
 Inaolaji Temitope, Field Laboratorian 2
 Oluseesin Mobolaji Joshua, Team Lead
 Sobakin Adedoyin Justina, Interviewer 1
 Bakare Olufemi Rasaq, Interviewer 2
 OladipupoBusturat Idowu, Counsellor 1
 Oluwawole Blessing Phebe, Counsellor 2
 Igbinosa Adesua, Field Laboratorian 1
 Omisore Abiodun Margaret, Field Laboratorian 2
 Adeyiga Adeyemi Mofolorunso, Team Lead
 Okunade Temitope Opeyemi, Interviewer 1
 Akiode Peter Oluwasegun, Interviewer 2
 Osuolale Bolatito Tundun, Counsellor 1
 Fatokun Anthonia Ayoola, Counsellor 2
 Onakade Adewale, Field Laboratorian 1
 Anunwa Uzoamaka, Field Laboratorian 2
 Aderibigbe Adedayo Ayodele, Team Lead
 Ojo Christiana Oluwagbemisola, Interviewer 1
 Akande Sunday Olalekan, Interviewer 2
 Nwaneri Magdalene, Counsellor 1
 Adegoke Adewale Gabriel, Counsellor 2
 Okafor Omotunde, Field Laboratorian 1
 Adeyanju Motolani, Field Laboratorian 2
 Ogunniyi Olsunkanmi Olamide, Team Lead
 Ulanmo Caroline Chinelo, Interviewer 1
 Aregbesola Oluwaseun Modupe, Interviewer 1
 Olusoga Omolade Olubusayo, Counsellor 1
 Oviawe Kenneth Osaro, Counsellor 2
 Osuntade Abiodun Abiola, Field Laboratorian 1
 Adekunle OlalekanZainab, Field Laboratorian 2
 Ojogbede AdewaleKayode, Team Lead
 Faloye Tolulope Olabisi, Interviewer 1
 Sotanwa Rotimi Adeshina, Interviewer 2
 Olukayode Oluwaseun Ige, Counsellor 1
 Gbadebo Oluwatosin Esther, Counsellor 2
 Atinsola Ayodeji, Field Laboratorian 1
 Apara Mary O, Field Laboratorian 2
 Akinsoji Olatinwo Ishola, Team Lead
 Olalekan Omolayo Mary, Interviewer 1
 Adewole Felix Bamidele, Interviewer 2
 Siyanbola Oludotun Olubukola, Counsellor 1
 Odusilo Abdulateef Adeyinka, Counsellor 2
 Lawal Olukayode, Field Laboratorian 1

Nwaokolo Christiana, Field Laboratorian 2
 Olorunsogo Ayodeji Opeyemi, Team Lead
 Emmanuel Oluwadamilare, Interviewer 1
 Omobomi Michael Favour, Interviewer 2
 AfolabiAfolasade Mary, Counsellor 1
 Emenyonu Vanessa Onyinye, Counsellor 2
 Agbadaola Akinola, Field Laboratorian 1
 Amoo Adebayo Aminat, Field Laboratorian 2
 Ajao Sheriff Olanrewaju, Team Lead
 Abimbola Abisayo Samuel, Interviewer 2
 Dare Temitope Hannah, Interviewer 2
 Olutayo Motunrayo Ayomide, Counsellor 1
 Akimnameji Folusho Omolade, Counsellor 2
 Agboola Tolulope O, Field Laboratorian 1
 Olayi Joy, Field Laboratorian 2
 Falana OlamideJuliana, Team Lead
 Oladunjoye Oluwadamilola Mary, Interviewer 1
 Olarinmoye Abayomi Tolu, Interviewer 2
 Olatunde-Ajagbe Yemisi Olayinka, Counsellor 1
 Adekunle Adeolu Joseph, Counsellor 2
 Kareem Aishat, Field Laboratorian 1
 Adeeso Joy Funmi, Field Laboratorian
 Onanubi Kehinde Abisoye, Team Lead
 Akintant Temitope Olanrewaju, Interviewer 1
 Oyedele Gbolabowale Adesanya, Interviewer 2
 Larunsi Abiodun Elizabeth, Counsellor 1
 Jaiyeola Ayomide Faith, Counsellor 2
 Adelodun Mary Olajumoke, Field Laboratorian 1
 Olufemi Olusola, Field Laboratorian 2
 Fagbohun Azizat Tolani, Team Lead
 Achodor Cynthia, Interviewer 1
 AjayiSamuel Temitope, Interviewer 2
 Oladejo Ajoke Misturat, Counsellor 1
 Adedeji Adelanke Tope, Counsellor 2
 Olowoyeye Adenike, Field Laboratorian 1
 Ajuebor Donald, Field Laboratorian 2
 Bisiriyu Adeniyi Hakeem, Team Lead
 Taiwo Mary Kehinde, Interviewer 1
 Kazeem Tajudeen Adebayo, Interviewer 2
 Daramola Tosin Rachael, Counsellor 1
 Omidiji Christiannah Bolanle, Counsellor 1
 Olaniyan Olawale, Field Laboratorian 1
 Omotola Ayodele Akeju, Field Laboratorian 2
 Ologun Augustine Omodele, Team Lead
 Akintola Oluwafisayomi, Interviewer 1
 Olajide Kolawole James, Interviewer 2
 Fadare Tolani Sadiat, Counsellor 1
 Ilawole Abayomi Ayomikun, Counsellor 2
 Aminat Olasumbo Agboola, Field Laboratorian 1
 Clement Timothy Alukwu, Field Laboratorian 2
 Hassan Fatima Alake, Team Lead
 Bamigboye Folasade Adejonwo, Interviewer 1
 Aderinko Opeyemi Michael, Interviewer 2
 Jenrola Mojisolra Morenikeji, Counsellor 1
 Adesina Olusegun Oloyede, Counsellor 2
 Sunmola OlufunkeOluwaremi, Field Laboratorian 1
 Chukwuemeka Andrew, Field Laboratorian 2
 Folajiimi-Senjobi Omowunmi Folake, Team Lead
 Oyebamiji Deborah Oyewumi, Interviewer 1
 Ojo Oladele Fagbamila, Interviewer 2
 Ayejusunle Esther Titi, Counsellor 1
 Fakeye Anthony Olutope, Counsellor 2
 Ogbonna Leona-Mary, Field Laboratorian 1
 Ayeni Olarenwaju, Field Laboratorian 2
 Martins Motunrayo Olayinka, Team Lead
 Adaraniwon Titilayo Oluwaseun, Interviewer 1
 Babawale Olusegun Ayotunde, Interviewer 2
 Daniel Oluwatoyin Christiana, Counsellor 1
 Fasusijimoh Olaoluwa, Counsellor 2
 Olowosile Bolaji, Field Laboratorian 1
 Okosun Peter, Field Laboratorian 2
 Babasola Oluwafolakemi Mary, Team Lead
 Fadipe Adenike Elizabeth, Interviewer 1
 Yahaya Musbau Adekunle, Interviewer 2
 Balogun Victoria Ifeola, Counsellor 1
 Fajemisin Adegbuji Joseph, Counsellor 2
 Mark Chinelo Prisca, Field Laboratorian 1
 Oyewole Oluwafemi, Field Laboratorian 1
 Oladepo Adeola Ayodotun, Team Lead
 Adebumiti Oluwatosin O, Interviewer 1
 Kehinde Seye Temitayo, Interviewer 2
 Bosede Olanrewaju Isreal, Counsellor 1
 AsiriwuEsther Omorogiuwa, Counsellor 2
 Igbinoba Amenaghanwon Maltida, Field Laboratorian 1
 Ogundero Oluwabunmi, Field Laboratorian 2
 Adewuyi Folashade Olutokunbo, Team Lead
 Olaleye Titilope Bolaji, Interviewer 1
 Denning Abakah, Interviewer 2
 Obi Amaka Jacinta, Counsellor 1
 Kazeem Olalekan Taoreed, Counsellor 2
 Ajayi Folake, Field Laboratorian 1
 Oyah Kingsley Moses, Field Laboratorian 2
 Balogun Ayodeji Joseph, Team Lead
 Muhammed Muftiat Oluwadamilola, Interviewer 1
 Aregbesola Kunle Samson, Interviewer 2
 Arowolo Bukayo Olatunji, Counsellor 1
 Adeyemi Florence Biola, Counsellor 2
 Musa Sarah, Field Laboratorian 1
 Adegbienro Adebukola, Field Laboratorian 2
 Akinwunmi-Omidiji Ayo, Team Lead
 Adelaja Bolanle Aboyede, Interviewer 1
 TimothySamuel Ibukun, Interviewer 2
 Adeleke Dorcas Olatundun, Counsellor 1
 Okeke Samuel Chikwuebuka, Counsellor 2
 Jibulu Folashade, Field Laboratorian 1
 Oriowo Oluwabunmi, Field Laboratorian 2
 AjayiOlusola Hassan, Team Lead
 Oyetoro Ganiyat Gbemisola, Interviewer 2
 Fadipe Adeniyi Jordan, Interviewer 2
 Omodare Oluwatosin, Counsellor 2
 Nwakaego Nwakaego Frances, Counsellor 2
 Jolaosho BeulahOdunayo, Field Laboratorian 1
 Odelotan Blessing, Field Laboratorian 2
 Olagunoye Ajibola Olatunji, Team Lead
 Afolabi Oluseyi Omotola, Interviewer 1
 Da-Costa Titilade Timileyin, Interviewer 2
 Oguntade Olusolape Adebimpe, Counsellor 1
 Adediji Peter Olaoluwa, Counsellor 2
 Fayoyiwa Grace, Field Laboratorian 1
 Oladele Bosede Bunmi, Field Laboratorian 2

Adepoju Funmilade Olasunmbo, Team Lead	Lumba Nelson, Counsellor
Adedeke Taiwo Ademola, Interviewer 1	Sani Sylvia, Counsellor
Abubakar Joy Oge, Interviewer 1	Musa Muhammed Sabo, Field Laboratorian
Obe Olufunsho Abayomi, Counsellor 1	Paul Hopson Mbi, Field Laboratorian
Adefolayiga Adebukola Morounkola, Counsellor 2	Chiroma Ali Umar, Team Lead
Osinaya Oluwatobi, Field Laboratorian 1	Dauda Ummi Bagari, Interviewer
Adeyeye Elizabeth Oluwabukola, Field Laboratorian 2	Muhammad Imran Barkindo, Interviewer
Faniku Ayokunle Iseoluwa, Team Lead	Danladi Hammari, Counsellor
Awakanabiola Ibukunola, Interviewer 1	Idris Bashir, Counsellor
Ulagba Elizabeth Ene, Interviewer	Audu Umar, Field Laboratorian
Balogun Oluwadamilola Ayomide, Counsellor 1	Peter Dorothy Simon, Field Laboratorian
Deinde Becky Olubunmi, Counsellor 2	Vahyalla Musa, Team Lead
Ajimuda Babatunde, Field Laboratorian 1	Mohammed Amaturrahman, Interviewer
Akinsuroju Adedolapo, Field Laboratorian 2	Musa Philip Butu, Interviewer
Suara-Ogunfolaji Khadijah Olawumi, Team Lead	Kauna Daniel, Counsellor
Ajimuda Morayo Felicia, Interviewer 1	Inuwa Amina, Counsellor
Akerere Babatope Hayford, Interviewer 2	Abdullahi Bala, Field Laboratorian
Babatunde Sammie Pelumi, Counsellor 1	Jacob Peter, Field Laboratorian
Falana Adeola Janet, Counsellor 2	Abdulrahman Faiza, Team Lead
Ologunaye Stephen, Field Laboratorian 1	Aliyu Ruqayya, Interviewer
Oduola Tolulope, Field Laboratorian 2	Ibrahim Mustapha Abdulrazak, Interviewer
Akinbowale Saheed Olalekan, Team Lead	Maikano Malate, Counsellor
Oyedokun Joy Oyetoke, Interviewer 1	Gidado Ishaqa A, Counsellor
Akinrogunde Olamigoke, Interviewer 2	Abubakar Bura Muhammed, Field Laboratorian
Ilesanmi Taiwo Julianah, Counsellor 1	Danjuma Haruna Bello, Field Laboratorian
Ashefor Sylvester Zamije, Counsellor 2	Dauda Saraya, Team Lead
Omojola Olawale, Field Laboratorian 1	Suleiman Aishatu, Interviewer
Oni Ibukunoluwa, Field Laboratorian 2	AhmadZakari Abdullahi, Interviewer
Ige Monsuru Mabayomije, Team Lead	Muhammed Abdullahi Magaji, Counsellor
Adeoye Rachael Olajumoke, Interviewer 1	Johnson Abraham, Counsellor
Aremu Damilare Adeniyi, Interviewer 2	Nggada Hyelhare Paul, Field Laboratorian
AkomolededeAnthonia Iyabode, Counsellor 1	Abdullahi Rabiu, Field Laboratorian
Ewuola Christopher Afolabi, Counsellor 2	Lawal Sulaiman, Team Lead
Ogunjobi Kemisola Mary, Field Laboratorian 1	Umar Maimuna Sule, Interviewer
Adepoju Tosin, Field Laboratorian 2	Mohammed Ismail, Interviewer
Bamgbade Bunmi Omotunde, Team Lead	Ijato Monica Odudu, Counsellor
Olufemi Olajumoke Adeola, Interviewer 1	Danbade Aliyu Isah, Counsellor
Bamiteko Olugbenga Adebajo, Interviewer 2	Musa Elizabeth Peleba, Field Laboratorian
Gbadamosi Oluwaseun Taibat, Counsellor 1	Abubakar Muhammed, Field Laboratorian
Babalola Sunday Ezekiel, Counsellor 2	Magaji Solomon Eziekiel, Team Lead
Iyanda Tolulope, Field Laboratorian 1	Haruna Mohammed Bose, Interviewer
Nwosu Ifeanyi Joseph, Field Laboratorian 2	Iliya Zira Sallah, Interviewer
North East Zone	Raymond Yoila S, Counsellor
Igawe Philip Bobu, Team Lead	Garba Hadiza Ammani, Counsellor
Grace Yila Maikano, Interviewer	Yahaya Alpha, Field Laboratorian
Adamu Shehu Timta, Interviewer	Adamu Muhammed, Field Laboratorian
Salisu Hafsat, Counsellor	Salihu Isa Idris, Team Lead
Awu Monica A, Counsellor	Sunday Benjamin, Interviewer
Musa Mamman, Field Laboratorian	Danfulani Elizabeth Bulus, Interviewer
MuhammedAdama, Field Laboratorian	Simon Evelyn, Counsellor
Ali Joy, Team Lead	Bukar Umar Farouk, Counsellor
Aliyu Ja'afar Jafar, Interviewer	Abubakar Idris Matinja, Field Laboratorian
Alkali Aisha, Interviewer	Sani Ammar, Field Laboratorian
Davo Blessing, Counsellor	Akandiya Job Yarakawa, Team Lead
Danazumi Samaila, Counsellor	Bello Maryam D, Interviewer
Ismail Ali Yerima, Field Laboratorian	Ahmad Baba Mustapha, Interviewer
Babaja Rashida, Field Laboratorian	Ibrahim Laraba, Counsellor
Abraham Zirra, Team Lead	WaziriBlessing C, Counsellor
Mohammed Awwal, Interviewer	Abubakar Adamu, Field Laboratorian
DavidRuby Gana, Interviewer	Abdu Ayuba, Field Laboratorian

Yusuf Abdullahi Aliyu, Team Lead
 Ibrahim Nafisat Kuru, Interviewer
 Muhammad Tasiu, Interviewer
 Solomon Sarah Hezekiah, Counsellor
 Salihu Asiya, Counsellor
 Ya'u Buhari, Field Laboratorian
 Usman Abubakar, Field Laboratorian
 Halima Ahmed, Team Lead
 Mangey Jarumi, Interviewer
 Yusuf Zainab, Interviewer
 Yakubu Amsa Ibrahim, Counsellor
 Eric Anita, Counsellor
 Enock Suleiman Bauchi, Field Laboratorian
 Abba Muh'd Tar, Field Laboratorian
 Mohammed Maru Mustapha, Team Lead
 Idi Junaidu, Interviewer
 Salihu Maryam, Interviewer
 Abdullahi Aisha, Counsellor
 Chama Abigail Jessey, Counsellor
 Muhammed Nafiu Wada, Field Laboratorian
 Reuben Barkahyel, Field Laboratorian
 Dauda Shalangwa, Team Lead
 Salihu Rukayya Sabiya, Interviewer
 Cletus Tari, Interviewer
 Sule Ahmed Adaya, Counsellor
 Suleiman Fanta, Counsellor
 Sani Ibrahim, Field Laboratorian
 Maidugu Yusuf Musa, Field Laboratorian
 Joseph Musa Gurati, Team Lead
 Tukur Auwal, Interviewer
 Adamu Mairo, Interviewer
 Bathon Tidari Ati, Counsellor
 Garba Martha Tani, Counsellor
 Ibrahim Adeh, Field Laboratorian
 Daniel Dauda, Field Laboratorian
 Shehu Mohammed Hashidu, Team Lead
 Sa'idiu Azimatu, Interviewer
 Baba Alikime, Interviewer
 Barguma Chafari Isa, Counsellor
 Aliyu Umar, Counsellor
 Alhamdu Daniel, Field Laboratorian
 Isayah Ezekiel Madina, Field Laboratorian
 Abdulkarim Mohammed A, Team Lead
 Muhammad Ismail Yahuza, Interviewer
 Muhammad Maryam Aliyu, Interviewer
 George Aggrey Lama, Counsellor
 Yusuf Umar, Counsellor
 Agnes Audu, Field Laboratorian
 Habila Soba, Field Laboratorian
 Garba Grace Kati, Team Lead
 Usman Hadiza Mohammed, Interviewer
 Hassan Munirah Muhammad, Interviewer
 Obonyilo Sunday Johnson, Counsellor
 Lukman Aliyu Baba, Counsellor
 Alh Babagana Modu, Field Laboratorian
 Abdullahi Shehu, Field Laboratorian
 Saidu Sarkinyamma Bello, Team Lead
 Dominic Solomon, Interviewer
 Muhammed Maryam, Interviewer
 Yakubu Elizabeth, Counsellor
 Adamu Muhammad Itas, Counsellor
 Mamza Munakur, Field Laboratorian
 Makwai Hassan Umar, Field Laboratorian
 Ahmed Maimuna, Team Lead
 Garba Amina Muhammed, Interviewer
 Nemtai Vakkai, Interviewer
 Yahaya Balarabe, Counsellor
 Goni Amma Muazu, Counsellor
 Keren Sajel, Field Laboratorian
 Sali Benjamin Luka, Field Laboratorian
 Yakubu Wilfred Hwankhi, Team Lead
 Abdullahi Mohammed Angula, Interviewer
 Kish Pemale, Interviewer
 UmarAli, Counsellor
 Ali Maria, Counsellor
 Salifa Jedi, Field Laboratorian
 Gambo Ndzuresa, Field Laboratorian
 Tulari Tine, Team Lead
 Abdulmutalebi Aisha A, Interviewer
 Goni Dzarma Hamman, Interviewer
 Ibrahim Yusuf Muhammed, Counsellor
 Mijah Limem, Counsellor
 Alyasau Zakari, Field Laboratorian
 Solomon Rimamndeyati, Field Laboratorian
 Samuel Tari, Team Lead
 Mukhtar Safiya, Interviewer
 Mohammed Muazu Danburam, Interviewer
 Abubakar Aisha, Counsellor
 Abubakar Aliyu Idris, Counsellor
 AlhassanSani Adamu, Field Laboratorian
 Muhammed Sani Usman, Field Laboratorian
 Sallau Yusha'u, Team Lead
 Musa Sarah, Interviewer
 Peter Emmanuel Vandu, Interviewer
 Garba Kati, Counsellor
 Umar Hajja Aida, Counsellor
 Isa Hyalade Sabo, Field Laboratorian
 Jonathan Akyaras Mamman, Field Laboratorian
 Jibrin Nawukari, Team Lead
 Abdullahi Isah, Interviewer
 Muhammed Hadiza, Interviewer
 Ginasha Joy, Counsellor
 Bashir Ado Hassan, Counsellor
 Faratu Saleh Adeh, Field Laboratorian
 Idiemise David, Field Laboratorian
 Idris Halimat, Team Lead
 Joshua Asimiya, Interviewer
 Dame Judith, Interviewer
 Anjili Peter, Counsellor
 Suleiman Safiya, Counsellor
 Audu Nana Guh, Field Laboratorian
 Hamidu Tijjani Usman, Field Laboratorian
 Ahmed Muktar Abubakar, Team Lead
 Ibrahim Umar, Interviewer
 Muhammad Maijidda, Interviewer
 Jonah Yacheson, Counsellor
 Dinshiya Joda Gabriel, Counsellor
 Ismail Musa Muhammed, Field Laboratorian
 Yakubu Musa Zakshi, Field Laboratorian
 Musa Sarki, Team Lead

Muhammad Saudatu, Interviewer
 Salihu Bako Apake, Interviewer
 Ali Fatima Alhaji, Counsellor
 Lumni Sunsuwa Deborah, Counsellor
 Jafa'aru Hadiza, Field Laboratorian
 Kyari Shettima, Field Laboratorian
 Ibrahim Bunu, Team Lead
 Aliyu Abubakar Garba, Interviewer
 Sogi Caroline, Interviewer
 Danladi Saraya, Counsellor
 Muhammad Nuru Zakari, Counsellor
 Hamma'adama Sumaiyatu, Field Laboratorian
 Ibrahim Abbas Muhammad, Field Laboratorian
North Central Zone
 Balogun Bunmi Dorothy, Team Lead
 Adamu Usman, Interviewer
 Umar Hannatu Sulaiman, Interviewer
 Nkom Michael, Counsellor
 Ahmed Bilkisu Adamu, Counsellor
 Salaudeen Haleematsadiat, Field Laboratorian
 UsmanMahmud, Field Laboratorian
 Lekwat Anastasia, Team Lead
 Hassan Ibrahim, Interviewer
 Ishaq Aisha, Interviewer
 AlkaliPromise, Counsellor
 Tijjani Bilkisu, Counsellor
 Okpanachi Mary, Field Laboratorian
 DanielGish, Field Laboratorian
 Emmanuel Ofana, Team Lead
 Shaba Abdulkadir, Interviewer
 Samke Kursiyya, Interviewer
 BabaRabi Asabe, Counsellor
 Abdullahi Ramatu, Counsellor
 Edache Onyeche, Field Laboratorian
 Lohor Ilya Petlong, Field Laboratorian
 Ajiboye Motunrayo, Team Lead
 Tijjani Sekinat, Interviewer
 Adah Erik Ojonugwa, Interviewer
 MohammadKolo Chekpa, Counsellor
 Fakunle Itunu, Counsellor
 AdajiOtafu Joseph, Field Laboratorian
 Daniel Nenbamun, Field Laboratorian
 Oyedeji Olufemi Solomon, Team Lead
 Nafiu Abdulwahab, Interviewer
 Mohammed Safiya Adamu, Interviewer
 Pyop SharonAndrew, Counsellor
 Shaibu Josephine H., Counsellor
 Adeleye Bolanle Enitan, Field Laboratorian
 Nimmak Samuel, Field Laboratorian
 AdogaRoselineOgenyo, Team Lead
 Garba Bashir Tahir, Interviewer
 Ndanusa Halima, Interviewer
 Michael Victoria, Counsellor
 MohammedSamira, Counsellor
 Akor Shedrack Egbunu, Field Laboratorian
 Musa Simi Priscilla, Field Laboratorian
 MuhammedAbdullahiUmar, Team Lead
 Akano Olayinka Eyiayo, Interviewer
 Donli Onyeka Ebiere, Interviewer
 Aboshin Elizabeth Member, Counsellor
 Zakari Ruth, Counsellor
 John Onuche Noah, Field Laboratorian
 Lawrence Gift, Field Laboratorian
 Adgidzi EuniceAsheobin, Team Lead
 Mustapha Olabanji Mohammed, Interviewer
 Abubakar Asmau Bello, Interviewer
 Idris Hajara, Counsellor
 Hosea Victor, Counsellor
 Bognet VirginiaPhilip, Field Laboratorian
 Timlo Danjuma Haruna, Field Laboratorian
 KassimAbdulmuminiMaikudi, Team Lead
 H Aliyu, Interviewer
 Musa Rifkatu, Interviewer
 Dei Jennifer Iverien, Counsellor
 Ochende John Femi, Counsellor
 Okpe Rita Ochanya, Field Laboratorian
 Nimark Maurice, Field Laboratorian
 DalhatuAhmedMuhammad, Team Lead
 Ibrahim Yahaya, Interviewer
 Mustapha Fatimah Wuraola, Interviewer
 Egwumah Grace Ile, Counsellor
 UsmanShehuldris, Counsellor
 OlatunjiAbdulwasiushola, Field Laboratorian
 Shedrach Bulus Nghozei, Field Laboratorian
 Abdullahi Abubakar, Team Lead
 Isah Idris Tijjani, Interviewer
 Shehu Hafsat, Interviewer
 Azuonyia Blessing, Counsellor
 Zakari Hauwa, Counsellor
 Usman Mohammed, Field Laboratorian
 KabiruUmar Nuhu, Field Laboratorian
 Hosle Tangkat, Team Lead
 Amile Msoo Sara, Interviewer
 Ibrahim Habiba, Interviewer
 AbdulahiMohammedWachiko, Counsellor
 Benson Peace, Counsellor
 Bolanle Fatima Salaudeen, Field Laboratorian
 Christopher Namo, Field Laboratorian
 DuhurLongjiSimon, Team Lead
 Ramalan Mariam Aliyu, Interviewer
 Obe Abu, Interviewer
 Halliday JanetData, Counsellor
 Akue Theophilus, Counsellor
 Abah Martha Ejiga, Field Laboratorian
 Alhassan Yusuf, Field Laboratorian
 DakumLongjiBenji, Team Lead
 Ahmed Medinat Abiodun, Interviewer
 Gofwen Morgan, Interviewer
 Suleiman Yusuf, Counsellor
 Ali Adama, Counsellor
 Riliwan Jamiu, Field Laboratorian
 Yunana Meshak, Field Laboratorian
 Dr. DzungweAmos Mvendaga, Team Lead
 Ephraim Grace, Interviewer
 Gana MusaAliyu, Interviewer
 Abdullahi Mansur, Counsellor
 Adetona Habibat, Counsellor
 AbidemiBunmi Ajayi, Field Laboratorian
 TankoRichard M, Field Laboratorian
 AbdullahiKassim Adams, Team Lead

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 AhmedIdris, Interviewer
 MohammedAnas Iliyasu, Counsellor
 Abubakar Tessy Naomi, Counsellor
 Manchesterismus Osime, Field Laboratorian
 UmarAliyu Saleh, Field Laboratorian
 AbdullahiNasiru, Team Lead
 AlhassanIbrahim Ibrahim, Interviewer
 Akpaka Martha, Interviewer
 Danladi Cathrine Maikasuwa, Counsellor
 Muhammed Abdulkareem, Counsellor
 Eze Kelvin, Field Laboratorian
 ZakouAmadou, Field Laboratorian
 Omenka AlexAlagi, Team Lead
 ShuaibuBala, Interviewer
 Aboje Aladi Victoria, Interviewer
 Zekeri Roseline Rabi, Counsellor
 Kitka Manji, Counsellor
 Habiba Ghazali, Field Laboratorian
 Haruna Kaburu Hassan, Field Laboratorian
 Tyotswam Yanmeer Simeone, Team Lead
 Mohammed Maimuna Katu, Interviewer
 Abdulkarim Abdulrazak, Interviewer
 Isa Abubakar, Counsellor
 Ibrahim Salama K, Counsellor
 Assumpta Nwankwo, Field Laboratorian
 Gideon Zam Nunkpan, Field Laboratorian
 JohnAnthony Tiri, Team Lead
 Oyelere Yewande Ololade, Interviewer
 Adamu Aisha Ahmad, Interviewer
 UpkojuJames Inalegwu, Counsellor
 Akunnwa Ifeoma, Counsellor
 TheophilusIdah Ebah, Field Laboratorian
 AmusaHazzan Taye, Field Laboratorian
 Katu AliyuMohammed, Team Lead
 Okowche Ebute David, Interviewer
 Katu Salamatu, Interviewer
 Tukur Lawal, Counsellor
 MohammedAisha, Counsellor
 Pankwal Bapina Masoyi, Field Laboratorian
 Rachael Christopher, Field Laboratorian
 Njemanze Ulunma, Team Lead
 Iyela Mekane, Interviewer
 Sani Usman, Interviewer
 Christopher Victoria Lakpa, Counsellor
 Saa'aungwa Uchenna Egbulafu, Counsellor
 Abdullahi Mairiga, Field Laboratorian
 Shuaibu Sahura Aliyu, Field Laboratorian
 Agbir Mary Mrumun, Interviewer
 Ahmed Sani, Interviewer
 Onuche Blessing Ejura, Interviewer
 Mohammed Sadiya, Counsellor
 Saad Aminat Omawumi, Counsellor
 Olayemi James, Field Laboratorian
 Ahmed Aminat Saba, Field Laboratorian
 Obele Oluchukwu, Team Lead
 Yakubu Ibrahim Idoko, Interviewer
 Bello Aisha, Interviewer
 Usman Abbas Mohammed, Counsellor
 Abdullahi Suwaiba, Counsellor
 Umar AhmedAdamu, Field Laboratorian
 Fidelis Moses Ebu, Field Laboratorian
 Olajide Tunde, Team Lead
 Umar Hauwa Nata'allah, Interviewer
 Akusuk Ishaku, Interviewer
 Katu Comfort Joshua, Counsellor
 Ogbagbe Beatrice Ngozi, Counsellor
 Ndagi Saba Mohammed, Field Laboratorian
 Samon Amegwa Oji, Field Laboratorian
 Julius Janet Jummai, Team Lead
 Tijjani Zaharadeen Dalhatu, Interviewer
 Tau Dingchi Joy, Interviewer
 Akopari Lateefa Bola, Counsellor
 Yunusa Emmanuel, Counsellor
 Aluku Alfred John, Field Laboratorian
 Shamaki Samson Y, Field Laboratorian
 Dangana Shehu, Team Lead
 Mohammed Fatima Ndanusa, Interviewer
 Onaolapo Yinka A., Interviewer
 Micheal Peter Adamu, Counsellor
 Aliyu Rukaya, Counsellor
 David Ademiluyi, Field Laboratorian
 Nyam Arin, Field Laboratorian
 Baba Kolo, Team Lead
 Bala Yahaya, Interviewer
 Aliyu Saadatu, Interviewer
 Ayodele Abidemi, Counsellor
 Suleiman Hajara Musa, Counsellor
 Ajibo Promise Adaora, Field Laboratorian
 Anate Halima Onize, Field Laboratorian
 Ibrahim Chindo Bisallah, Team Lead
 Musa Shuaibu, Interviewer
 Opadeyi Yetunde, Interviewer
 Chigbu Dorcas Onyeje, Counsellor
 Lenkhat Blessing Ishaku, Counsellor
 Okwuowulu Onyinye, Field Laboratorian
 UmarAbdullahi Namadi, Field Laboratorian
 OchigboMichael Onyilo, Team Lead
 Maikasuwa Mohammed Ahmad, Interviewer
 Issa Balikis Ayoola, Interviewer
 Danladi Joseph, Counsellor
 Johnson Syntyche, Counsellor
 UsmanAhmed Tanko, Field Laboratorian
 Ogunkoya Funke Oluseun, Field Laboratorian
 EmmanuelOmotoyinbo, Team Lead
 Zakari Abubakar Zaria, Interviewer
 Danladi Nanna, Interviewer
 Ojabo Ben Abba, Counsellor
 Elechukwu Nkiruka, Counsellor
 Iloeje Uchenna, Field Laboratorian
 John Oge, Field Laboratorian
 Okeji Wakilat, Team Lead
 Yahaya Gloria, Interviewer
 Yahaya Abdullahi Doma, Interviewer
 Amanyi Mary Iyonu, Counsellor
 Buhari Abdulhafeez Oladimeji, Counsellor
 Abdullahi Aminu, Field Laboratorian
 Emeka Aniachunam, Field Laboratorian
 HamzaSalma, Team Lead
 Gwom Jerry Dalyop, Interviewer

Oyinloye Bukola A, Interviewer
 Onwe Moses, Counsellor
 Memeyen Titilayo, Counsellor
 Mohammed Majin, Field Laboratorian
 Agba Rita Uyilowhomma, Field Laboratorian
 Sadiq Abubakar Musa, Team Lead
 Farouk Aliyu Haydar, Interviewer
 Makpa Victoria Ilya, Interviewer
 KazumKhadijat Omofolahan, Counsellor
 Joroh Enoch Daniel, Counsellor
 Chundung Davou, Field Laboratorian
 Abdul-Azeez Aisha Bint, Field Laboratorian
 Adejo Grace, Team Lead
 Ayuba Babatunde Akeem, Interviewer
 Onda Erima, Interviewer
 Ibrahim El-Ameen, Counsellor
 Slowe Triumph, Counsellor
 Dike Godfrey Chukwudi, Field Laboratorian
 Paul Daniel Edet, Field Laboratorian
North West Zone
 Abdullahi Naja'atu, Team Lead
 Lawal Aisha Shehu, Interviewer
 Ibrahim Dalhatu Nasir, Interviewer
 Tukur Badiya Bello, Counsellor
 Ahmed Safiya, Counsellor
 Muhammad Musa Abdullahi, Field Laboratorian
 Ibrahim Maryam, Field Laboratorian
 Atiku Salma Ibrahim, Team Lead
 Shehu Farouq Hayat, Interviewer
 Abubakar Sadeeq Suleiman, Counsellor
 Shehu Maryam Salihu, Interviewer
 Peter Justina, Counsellor
 Yahaya Muhammad, Field Laboratorian
 Adamu Amina Usman, Field Laboratorian
 Usman Halima, Team Lead
 Ibrahim Wasilat Mashi, Counsellor
 Madaki Hameeda Mansur, Interviewer
 Buhari Mustapha Farouk, Interviewer
 Sani Jamilu Alhaji, Counsellor
 Abba Mustapha, Field Laboratorian
 Altine Rilwanu, Field Laboratorian
 Mohammed Maimuna Baban Inna, Team Lead
 Yusuf Shamsu Saleh, Interviewer
 Isyaka Zulaihat Ibrahim, Interviewer
 Umar Isah Buhari, Counsellor
 Luka Grace Abbott, Counsellor
 Aliyu Abdullahi, Field Laboratorian
 BasheerAbubakar, Team Lead
 Balarabe Rabi, Interviewer
 Abba Sadi, Interviewer
 Usman Jamila Ladan, Counsellor
 Bandi Abdulmalik, Counsellor
 Abdullahi Hamisu, Field Laboratorian
 Lawan Umar Umar, Field Laboratorian
 Akanet Sheyin Richard, Team Lead
 Sirajo Ishaq Bala, Counsellor
 Dahatu Aliyu Tijjani, Interviewer
 Bello Firdausi Khatume, Counsellor
 Muhammad Nafisa Adamu, Interviewer
 Bello Hashimu Bunza, Field Laboratorian

Muhammad Abubakar, Field Laboratorian
 Mande Aliyu Tambaya, Team Lead
 Danladi Hannatu, Counsellor
 Surajo Zaharaddeen, Interviewer
 Abubakar Shuhaima, Counsellor
 Garba Hauwau Dangida, Interviewer
 Mohammed Auwal, Field Laboratorian
 Shuaibu Umma, Field Laboratorian
 Aliyu Zainab Abdullah, Team Lead
 Bello Fatima Tafida, Interviewer
 Tijjani Tijjani, Interviewer
 Ibrahim Rashida Gorko, Counsellor
 Abubakar Shamsu Shehu, Counsellor
 Bello Nafisatu, Field Laboratorian
 Shuaibu Shamsudeen, Field Laboratorian
 Shehu Ibrahim Ado, Team Lead
 Lukman Ibrahim Musa, Interviewer
 Abba Su'ad Yola, Interviewer
 AliyuJamila, Counsellor
 Yahaya Abdulkadir, Counsellor
 Attahiru Saifullahi, Field Laboratorian
 Muhammad Zainab, Field Laboratorian
 Danjuma Jenom Sunday, Team Lead
 Hussaini Usman, Interviewer
 AliyuMaryamSani, Counsellor
 Atoyebi Rukayya, Interviewer
 Iliyasu Garba, Counsellor
 Sani Ahmed Kusada, Field Laboratorian
 Garba Samiru, Field Laboratorian
 Bashir Khadija, Team Lead
 Muhammad Nabila Turaki, Counsellor
 Adam Muhammad Yau, Counsellor
 El-Yakub Firdausi Ado, Interviewer
 Musa Idris, Interviewer
 Usman Victor, Field Laboratorian
 Ahmad Maryam, Field Laboratorian
 Aliyulbrahim Shehu, Team Lead
 Abubakar Sanusi, Counsellor
 Abdullahi Abba Muhammad, Interviewer
 Muhammad Umma, Interviewer
 Usman Zuwaira Ladan, Counsellor
 Sama'ilu Yusuf, Field Laboratorian
 Bala Jamila Saleh, Field Laboratorian
 Abba Rabiu Hussain, Team Lead
 Sani Mustapha, Interviewer
 Abubakar Maryam K, Counsellor
 Shaheed Saifullahi, Counsellor
 Ahmad Aminatu Bala, Interviewer
 Lukman Yusuf, Field Laboratorian
 Bature Muhammad M., Field Laboratorian
 Hassan Safina Mashi, Team Lead
 Alhassan Abdullahi, Counsellor
 Ishiaku Rahina, Counsellor
 Bako Junaidu Mustapha, Interviewer
 Adamu Aisha Ali, Interviewer
 Usman Mukhtar, Field Laboratorian
 Isa Murtala, Field Laboratorian
 Musa Muslim Kurawa, Team Lead
 Sani Asmau Kankia, Interviewer
 Dahiru Maimuna, Interviewer

Isyaku Hadiza, Counsellor	Haruna Yusuf, Team Lead
Adam Salamatu Muhammad, Counsellor	Hassan Suwaiba, Interviewer
Ahmad Salisu Madaki, Field Laboratorian	Yohanna Christiana Rambo, Counsellor
Aliyu Isa Yeldu, Field Laboratorian	Muazu Aminu, Counsellor
Baba Hadiza, Team Lead	Ibrahim Inusa, Interviewer
Salisu Umar Dabai, Interviewer	Sani Muntari, Field Laboratorian
Abdulrahman Maryam, Interviewer	Yusuf Hajara, Field Laboratorian
Yusuf Musayyib, Counsellor	Samaila Kabiru, Team Lead
Hamisu Asmau, Counsellor	Adam Sunusi Salisu, Counsellor
Saad Aminu, Field Laboratorian	Dalhat Maryam Muazu, Counsellor
Ibrahim Saratu Tunau, Field Laboratorian	Tijjani Illyasu, Interviewer
HussainAisha Umar, Team Lead	Lawal Shamsiya, Interviewer
Bello Salihu Wada, Interviewer	Umaru Samuel, Field Laboratorian
Rufai Zuwaira, Interviewer	Okechukwu Chisom Emmanuel, Field Laboratorian
Jouro Ibrahim Adam, Counsellor	Nasidi Abubakar Said, Team Lead
Paul Gloria Yusuf, Counsellor	Usman Rabi Muhammed, Interviewer
Adamu Hauwa, Field Laboratorian	Maida Emmanuel Tajo, Counsellor
Muhammad Mukhtar, Field Laboratorian	Ibrahim Zainab Danladi, Counsellor
Abdulsamad Hassan, Team Lead	Sa'ad Fatima Abubakar, Interviewer
John Joyce, Interviewer	Ibrahim Sani Ahmed, Field Laboratorian
Abubakar Salihu, Interviewer	Ibrahim Talatu, Field Laboratorian
Ibrahim Fatima Abdullahi, Counsellor	Attahiru Abubakar, Team Lead
Muhammad Usman, Counsellor	Lawan Jibrin Muhammed, Interviewer
Sani Fatima, Field Laboratorian	Ibrahim Habiba, Interviewer
Dahiru Nura, Field Laboratorian	Sada Aliyu, Counsellor
Ibrahim Mani Kankia, Team Lead	Saminu Shamsiya Usman, Counsellor
Buhari Muhammad, Interviewer	Paul Precious Awulo, Field Laboratorian
Dalhatu Maimuna Tijjani, Interviewer	Isa Abdulkadir, Field Laboratorian
Tukur Hassan Maru, Counsellor	Auwal Aliyu Aliyu, Team Lead
Ismail Bala, Counsellor	Sadiq Abubakar Saidu, Interviewer
Adamu Mahdi Ahmed, Field Laboratorian	Usman Hafsat, Interviewer
Abdurrauf Sani, Field Laboratorian	Godwin Emmanuel, Counsellor
Yusuf Sameer Sanusi, Team Lead	Jibril Suwaiba, Counsellor
Galadimawa Susan, Interviewer	Mohammed Abdurrahman, Field Laboratorian
Bello Umar Kasarawa, Interviewer	Aliyu Abdulkadir, Field Laboratorian
Ahmad Ummahanni Atiku, Counsellor	
Magaji Juma'are Makarfi, Counsellor	
Zebulon Kennedy, Field Laboratorian	
Isa Yakubu, Field Laboratorian	
Abubakar Bilkisu Gulma, Team Lead	
Saminu Aliyu, Interviewer	
Muhammad Halisa, Interviewer	
Tahir Rahama, Counsellor	
Lawal Naziru, Counsellor	
Lawal Nazir Habib, Field Laboratorian	
Firdausi Abubakar, Field Laboratorian	
Ahmed Rabiu Sambo, Team Lead	
Johnson Euodias Chat, Counsellor	
Barau Hassan, Counsellor	
Biliyaminu Zainab Abdullahi, Interviewer	
Buhari Abbatti, Interviewer	
Liti Yahaya, Field Laboratorian	
Muhammad Umar, Field Laboratorian	
Julius Jessica Solomon, Team Lead	
Yunusa Nafisa Bello, Interviewer	
Halilu Umar Anka, Interviewer	
Bako Sarah, Counsellor	
Abdulkadir Nura, Counsellor	
Ilu Lurwanu, Field Laboratorian	
Alhassan Yunusa, Field Laboratorian	

South South Zone

Anayo Ozowuba, Zonal Mobilizer
 Lekia Princewill Eli, State Based Mobilizer
 Paul Isiugo, State Based Mobilizer
 Egeni Godspower Ken Anselem, State Based Mobilizer
 Ibe Agbirigba, Community Mobilizer
 Hopelyn Ifeoma, Community Mobilizer
 Jim David, Community Mobilizer
 Ifeanyi Ogbonda, Community Mobilizer
 Godspower Mgba, Community Mobilizer
 Eke Bethel Ikedi, Community Mobilizer
 Kiikpoye Mark, Community Mobilizer
 Tenegheni Linus, Community Mobilizer
 Okorogba Godspower, Community Mobilizer
 Kaliwana Ali, Community Mobilizer
 Sogbeye Briggs, Community Mobilizer
 Clifford Emmanuel, Community Mobilizer
 Ibiang Efayohobase Ekpo, Community Mobilizer
 Gold Amachree, Community Mobilizer
 Adairi Tolofari, Community Mobilizer
 Dokubo Sogbeba, Community Mobilizer
 Austin Braide, Community Mobilizer
 Titi Sunday Goya, Community Mobilizer
 Llyod Ebenezer, Community Mobilizer

Ohalem Smart Emeka, Community Mobilizer
 Chibundu Uchegbu, Community Mobilizer
 Tenalo Stephen Bariduanen, Community Mobilizer
 Acheola Mgbede, Community Mobilizer
 Barisi-Letam Chibor, Community Mobilizer
 Te-Erebe Barilugbene Humble, Community Mobilizer
 Edith Edoghotu John, Community Mobilizer
 Otobo Dennis, Community Mobilizer
 Ezechimere Royal Chinedum, Community Mobilizer
 Anucha Sylvester I., Community Mobilizer
 Jaja Gabriel Bruce, Community Mobilizer
 Ananwudi Chukwuma Cyril, Community Mobilizer
 Manikpo Gibson Epbabari, Community Mobilizer
 Chinedu Chukwuma, Community Mobilizer
 Allu Favour Clement, Community Mobilizer
 Felix Essien Ekandem, State Based Mobilizer
 Mary Etim Bassey, State Based Mobilizer
 Emediong D Udon, State Based Mobilizer
 Anienamakan E. Udo, Community Mobilizer
 Esifa Joseph, Community Mobilizer
 Wasinfereke Udoessien, Community Mobilizer
 Asuquo Effiong Andrew, Community Mobilizer
 Inyang O. Hezekiah, Community Mobilizer
 Otu Josiah Gebriel, Community Mobilizer
 Ofonime John Darby, Community Mobilizer
 Abasiubong J Edet, Community Mobilizer
 Joseph Ngwonye, Community Mobilizer
 Blessing Edet Samuel, Community Mobilizer
 Blessing Ekwere, Community Mobilizer
 Udoфia Itoro Akpan, Community Mobilizer
 Uba U Kingsley, Community Mobilizer
 Gloria Felix Obong, Community Mobilizer
 Asuquo Essien Isong, Community Mobilizer
 Mayen Okopide, Community Mobilizer
 Ekwere Yaknti E., Community Mobilizer
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 Elizabeth Ofong Ndah, Community Mobilizer
 Archibong Usen Okon, Community Mobilizer
 Emmanuel Udoh, Community Mobilizer
 Abanuma Linus I, Community Mobilizer
 Emaediong Cyril, Community Mobilizer
 Ambrose, Prosperity, Community Mobilizer
 Nsisong Patrick Ekong, Community Mobilizer
 Edi-Ubong Umoumoh, Community Mobilizer
 Idongesit Harry U., Community Mobilizer
 Janet Nkereuwem Eneokon, Community Mobilizer
 Idoreyin Felix, Community Mobilizer
 Ubong Edwin Obot, Community Mobilizer
 Christiana I. Etim, Community Mobilizer
 Udeme Michael, Community Mobilizer
 Ekpo Ignatius Itu, Community Mobilizer
 Uduak Peter Akpan, Community Mobilizer
 Utomobong Peter, Community Mobilizer
 Linus Udoma, Community Mobilizer
 Mfonobong Smart O., Community Mobilizer
 Solomon Bassey Ema, Community Mobilizer
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 Tonye Ayamah, State Based Mobilizer
 Summerset B Kieri, State Based Mobilizer

Nelson-Ebimie Rachel Ebire, State Based Mobilizer
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 Osezuwa Ovonlen, Community Mobilizer
 Otobo Dennis, Community Mobilizer
 Dickson Mokison, Community Mobilizer
 Oguta Seleke-Owei, Community Mobilizer
 Beauty B. Ozuzu, Community Mobilizer
 Osumanyi Amina Osman, Community Mobilizer
 Ombu Henry, Community Mobilizer
 Aroh Josephine, Community Mobilizer
 Egbe Oyinpreye, Community Mobilizer
 Ndiamu Oyinmiebi, Community Mobilizer
 Emmanuel Oyindoubara, Community Mobilizer
 Ben-Wakama Ebigoni, Community Mobilizer
 Patricia Oduh, Community Mobilizer
 Edodo Christopher, Community Mobilizer
 Abule Festus, Community Mobilizer
 Victor Omubo, Community Mobilizer
 Keremah Walter, Community Mobilizer
 Awudu Ebibiegbaghe, Community Mobilizer
 Roseline Ngoka, Community Mobilizer
 Ofoin Ben, Community Mobilizer
 Paul Ayibanua, Community Mobilizer
 Azigere Martins, Community Mobilizer
 Naibi Ballantyne, Community Mobilizer
 Ben Lawrence Ekpezu, Community Mobilizer
 Rose Nwokezi, Community Mobilizer
 Juliana Agida, Community Mobilizer
 Sambo Tiemote, Community Mobilizer
 Igoin A. Azibalamabini, Community Mobilizer
 Danbokolo Ayebainaemi, Community Mobilizer
 Titus Seribo Godspower, Community Mobilizer
 Kwegbe Adendo, Community Mobilizer
 Minna Botamarau-Etaremi, Community Mobilizer
 Chamberlain Fedigha, Community Mobilizer
 Ifere Obeten, State Based Mobilizer
 Lawrencia Nseobot, State Based Mobilizer
 Bassi I. Ibor, State Based Mobilizer
 Egbe Ebe Ukera, Community Mobilizer
 Innocent Ojong, Community Mobilizer
 Christiana Okon, Community Mobilizer
 Godwin Wonah, Community Mobilizer
 Umoh Eno, Community Mobilizer
 Dr. Emmanuel Adaji, Community Mobilizer
 Maria Ofem Abam, Community Mobilizer
 Nkoyo Oka, Community Mobilizer
 Ekong Sylvanus, Community Mobilizer
 Agbor Martins Okon, Community Mobilizer
 Ajeh Onen Omenka, Community Mobilizer
 Mary Erim, Community Mobilizer
 Ekuri Kingsley Ogar, Community Mobilizer
 Edith Essi-Animbang, Community Mobilizer
 Edor Harrison Rebua, Community Mobilizer
 Owan Emenrecia, Community Mobilizer
 Justina I. Ashagwu, Community Mobilizer
 Janet Ubelebi Aniah, Community Mobilizer
 Patrick Abang, Community Mobilizer
 Agida Solomon, Community Mobilizer
 Christiana Kujoh, Community Mobilizer
 Joseph Okate, Community Mobilizer

Kyrian Ushen, Community Mobilizer	Iyoribhe Michael, Community Mobilizer
Priscilla Okuku, Community Mobilizer	Esther Enekhor, Community Mobilizer
Catherine Igelle, Community Mobilizer	Obasanmi Jude, Community Mobilizer
Friday Ogar, Community Mobilizer	John Odion Unuigbe, Community Mobilizer
Dr. Mrs. Ikwo Okpebri, Community Mobilizer	Kedi Cynthia, Community Mobilizer
Paul Inyang, Community Mobilizer	Omozee Vivian, Community Mobilizer
Eleme Alaga, Community Mobilizer	Umoru David, Community Mobilizer
Adi Cynthia Aboli, Community Mobilizer	Hajia Aperua Yusuf, Community Mobilizer
Aja Mba, Community Mobilizer	Kadiri Blessing Brown, Community Mobilizer
Stella Eyo, Community Mobilizer	Shaka Sherifat, Community Mobilizer
Asuquo Akpama, Community Mobilizer	Ozeigbe Ighodaro, Community Mobilizer
Mary Ekpo Bassey, Community Mobilizer	Itua Osasunmhen, Community Mobilizer
Grace Sifo Obiageli, State Based Mobilizer	Akpan, Community Guide
Eris Ibi, State Based Mobilizer	Friday Udo Isong, Community Guide
Onowugbeda Esther, State Based Mobilizer	Chief Akpan Joshua, Community Guide
Uzoka Emmanuel, Community Mobilizer	Christian Faith Mission, Community Guide
Okerekutu Daniel Okemute, Community Mobilizer	Bassey Edet Aya, Community Guide
Solace Ugochukwu Uba, Community Mobilizer	Edueno Inyang, Community Guide
Ojo Evelyn, Community Mobilizer	Udesi Udung Okpo, Community Guide
Rita Owuo, Community Mobilizer	Cecilia Peter, Community Guide
Dorcas Owhojero, Community Mobilizer	Francis Nkuda, Community Guide
Simeon Newton, Community Mobilizer	Benjamin Timothy, Community Guide
Ojugbo Ogar Augustine, Community Mobilizer	Sunday John Uwe, Community Guide
Ogbinaka Donatus, Community Mobilizer	Peter Okon Ekwere, Community Guide
Momoh Victor, Community Mobilizer	Chief Ekidem, Community Guide
Lauretta Onieba, Community Mobilizer	Oduok, Community Guide
Amrete Cynthia, Community Mobilizer	Engr Sunday Inyang, Community Guide
Mercy Alakis Awana, Community Mobilizer	Chief A U Ukpong, Community Guide
Nkpo Isaiah Uwa, Community Mobilizer	Monday Sammy Jacob, Community Guide
Anthony Nwachukwu, Community Mobilizer	Uton John Ene, Community Guide
Ezolome Kadiri, Community Mobilizer	Akpan Dickson Attat, Community Guide
Andrew Agboro Eseoghene, Community Mobilizer	Reuben Nkanah Akpan, Community Guide
Udior Augustine, Community Mobilizer	Idem Eld Enefiok, Community Guide
Chibueze Sixtus Uchegbu, Community Mobilizer	Archibong, Community Guide
Florish Izibili, Community Mobilizer	Michael William, Community Guide
Johnson Omoni Florence, Community Mobilizer	Joseph Daniel David, Community Guide
Bridget Kubiangha, Community Mobilizer	Edem Eyo, Community Guide
Helen Lelekumo, Community Mobilizer	Etim Udo Iko Akpabio, Community Guide
Nanu Ola Micheal, Community Mobilizer	Chife Anthony Ekpe, Community Guide
Peter Anighoro, Community Mobilizer	Emmanuel Edem Okon, Community Guide
Edafe Hitler, Community Mobilizer	Chife Bassey Joshua, Community Guide
Nwaeli Chidinma Paschal, Community Mobilizer	Chife Ezekiel D Akpan, Community Guide
Eyekomogba Grace, Community Mobilizer	Engr Okon M. Umores, Community Guide
Seifegha Tare-Out, Community Mobilizer	Chife Titus Udom, Community Guide
Omokaro Felicia, State Based Mobilizer	Monday Brownson, Community Guide
Israel Owoade, State Based Mobilizer	Aniekam Ikpong, Community Guide
Ukponahiunsi Lawrence, State Based Mobilizer	Sunday Udoekong Akwa, Community Guide
Francis Osayande, Community Mobilizer	Lawrence Udosen, Community Guide
Gbenoba Nancy Nkem, Community Mobilizer	Solomon Joshua, Community Guide
Osamudiamen Igbinoba, Community Mobilizer	Justine Edet Jimmy, Community Guide
Eghomanwanre Ayere, Community Mobilizer	Akpan Job Udobong, Community Guide
Uwadiae Oboghene, Community Mobilizer	Jim Jonah Etukudo, Community Guide
Urowayino Omayemi, Community Mobilizer	Efanga Inyang, Community Guide
Odigie N. Sandra, Community Mobilizer	Akpan Asua, Community Guide
Irorere Peter, Community Mobilizer	Godwin Archibong, Community Guide
Osebhor Juliet, Community Mobilizer	Ekanem Ekanem, Community Guide
Roseline Odiase, Community Mobilizer	Chief Edet O Umores, Community Guide
Abdullateef Bashorun, Community Mobilizer	Emmanuel Hanson, Community Guide
Paul Oyarenua, Community Mobilizer	Paul Okokon, Community Guide
Bartholomew Okondo, Community Mobilizer	Edet Umo Akpan, Community Guide

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 Akpan Umoibe, Community Guide
 Essiet Umoh, Community Guide
 Ikot Ekpak, Community Guide
 Friday Udoette, Community Guide
 Patrick Dick, Community Guide
 Dominic Johnson, Community Guide
 Usoikpong, Community Guide
 Monday Dick Ntoto, Community Guide
 Eyo Nkanta, Community Guide
 Chief Okon Udomfu, Community Guide
 John Akpan Ikonah, Community Guide
 Chief James Ekwere, Community Guide
 Dickson Umoh, Community Guide
 Chief Udo Ntino, Community Guide
 Chief Sunday Frank, Community Guide
 Nicholas Kende, Community Guide
 Bolanle Ebi, Community Guide
 Barugu O. Utavie, Community Guide
 Felix Micheal, Community Guide
 Delipule Alex Peters, Community Guide
 Promise Otong Ayamah, Community Guide
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 Sunday Mgbeke, Community Guide
 Felicia Yinkore, Community Guide
 Enos Igoni, Community Guide
 Sarah Elvin, Community Guide
 Godknows Assumpta, Community Guide
 Azou Wisdom, Community Guide
 Kosuwei I. Patrick, Community Guide
 Thomas Awiki, Community Guide
 Francis Amaitari, Community Guide
 Bonny Fiezibeya, Community Guide
 Omokewe Godgift, Community Guide
 Ugbe Kingsley Tumini, Community Guide
 Golpin Osiki, Community Guide
 Edolor Hope, Community Guide
 Ogoinja Oyindoubara, Community Guide
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 Asanaebi Edward, Community Guide
 Afili Oweilakeme, Community Guide
 Orhvertakpo Peter, Community Guide
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 Oybolo Mattew, Community Guide
 Oybolo Ebi Clifford, Community Guide
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 Robinson Atonbara, Community Guide
 Asechemie Eunice Amiebi, Community Guide
 Naomi Robinson, Community Guide
 Powedei Debekeme, Community Guide
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 Suboh Stephen, Community Guide
 Ogbotimibo Ebimokemini, Community Guide
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 Bestman Ogapadei, Community Guide
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 Woyinkuro Mattew, Community Guide
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 Daupade Emmanuel, Community Guide
 Saviour Rufus, Community Guide
 Newman Amas, Community Guide
 Imoro Famous, Community Guide
 Siboke Preye, Community Guide
 Ibifiri Okujagu, Community Guide
 Solomon Anthony E, Community Guide
 Ezeamaiwe Innocent, Community Guide
 Odumegwu Amaka, Community Guide

Igumbor Waziri, Community Guide
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 Kuuhodu Anthony, Community Guide
 Pius Chidi, Community Guide
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 Vera Okafor, Community Guide
 Nsolo Azuka Augustine, Community Guide
 Okologbo Ijeoma Christy, Community Guide
 Odogbo Onyeakaluziam Joseph, Community Guide
 Omuni Ugochukwu Fred, Community Guide
 Udeh Emmanuel Chuks, Community Guide
 Elujekor Endurance Onyekachi, Community Guide
 Odu Evelyn, Community Guide
 Eboagwu Happy Nonyelum, Community Guide
 Rapu Valentine, Community Guide
 Egonu Emmanuel, Community Guide
 Adinkwu Evelyn, Community Guide
 Osokogu Faith Chidinma, Community Guide
 Anochie Nwayobuije, Community Guide
 Onyenike Romanus Emeka, Community Guide
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 Echi Sunday C, Community Guide
 Ochor Robert Chika, Community Guide
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 Opia Gabriel, Community Guide
 Daniel Miller, Community Guide
 Ochuko Odudu, Community Guide
 Julius Ederiene, Community Guide
 Adogbeji Ochuko, Community Guide
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 Ozuem Collins, Community Guide
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 Christmas Joseph, Community Guide
 Gabriel Prince Esiere, Community Guide
 Ognerhoror Onoriode Lucky, Community Guide
 Faith Akitikori, Community Guide
 Daniel Avwomakpa, Community Guide
 Friday Jewo, Community Guide
 Atamometa Godstime, Community Guide
 Blessing Ogbodu, Community Guide
 Ngwu Desmond, Community Guide
 Igba Ejime Edith, Community Guide
 Eziomedafe J Josephine, Community Guide
 Ewono Azino, Community Guide
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 Justina Eki, Community Guide
 Audu Onome Esther, Community Guide
 Okirika Julie, Community Guide
 Olayinka Johnson, Community Guide
 Sene God'spower, Community Guide
 Lyon Akpode Amaju, Community Guide
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 Omare Rita, Community Guide
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 Oghenechovwe Alero, Community Guide
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 Ogbeide Collins, Community Guide
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 Joshua Aisiriwa, Community Guide
 Amos Oviasu, Community Guide
 Efosa Igbinedion, Community Guide
 Ozougwu Chinelo Marian, Community Guide
 Lawani Deborah Imenfan, Community Guide
 Nosa Odelevbo, Community Guide
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 Gbenoba Patricia Okwudili, Community Guide
 Eganbor Frederick, Community Guide
 Moses Omoregie Ugbo, Community Guide
 Olukayode Ajayi, Community Guide
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 Ogbomwan George, Community Guide
 Daniel Osagie Arnold, Community Guide
 Edobor Michael, Community Guide
 Edobor Michael, Community Guide
 Joseph Ameosa, Community Guide

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 Odeh Faith, Community Guide
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 Christopher Ekhator, Community Guide
 Aghafekokhian Samuel, Community Guide
 Pst. Michael Amagbakhen, Community Guide
 Chinedu Okunbor Benard, Community Guide
 William Akpede, Community Guide
 Ifioma Johnbull, Community Guide
 Afesumen Peace, Community Guide
 Aigbodion Queen, Community Guide
 Uanserume Stephen, Community Guide
 Agidigbi Rebecca, Community Guide
 Momodu Yakubu, Community Guide
 Monday Saeedlar Umar, Community Guide
 Aigbokhai Edeki, Community Guide
 Aimuan Osamudiamen, Community Guide
 Oyamhenda Thursday Osazuwa, Community Guide
 Aigbosare Omoyemwen Loveth, Community Guide
 Onwugbenu Calistus E., Community Guide
 Uwadiae Elisha Uyi, Community Guide
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 Igbo Grace, Community Guide
 Blessing Uwadiae, Community Guide
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 Osonokwu Blessing, Community Guide
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 Kelvin Osemwiegbe, Community Guide
 Damiro Richard, Community Guide
 Adewumi Richmond Lawrence, Community Guide
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 Paul Christiana Olu, Community Guide
 Isaac Sunday, Community Guide
 Ajiboye Daniel Idowu, Community Guide
 Ogah Vincent, Community Guide
 Kelimat Iyamah, Community Guide
 Ikerodah Nefisat, Community Guide
 Rukayetu Garuba, Community Guide
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 Subedat Braimah, Community Guide
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 Amodu Ibrahim Mustapha, Community Guide
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 Oboh Abdulazeez, Community Guide
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 Imion Gift, Community Guide
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 Odion Peter, Community Guide
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 Eigbedion Alexendar E., Community Guide
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 Lucky Jonathan, Community Guide
 Peter Idemudia, Community Guide
 Oliha Cyrill, Community Guide
 Ehimhen Lawrence, Community Guide
 Esene Oseyemon Fancis, Community Guide
 Igene A. Morison, Community Guide
 Ikekhuamen Feguson, Community Guide
 Uwoghiren Blessing Osariemen, Community Guide
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 Osemwengie Alexander, Community Guide
 Osunde Osazee, Community Guide
 Abel Osatohanmwen Iyamu, Community Guide
 Okunghae Henry, Community Guide
 Ekhator Jeffrey Enoyose, Community Guide
 Uhunmwangho Nosa Abeieve, Community Guide
 Onyenma Loveday H., Community Guide
 Nweke Chuks, Community Guide
 Isioma Joan Oknonkwo, Community Guide
 Eleta Anslem, Community Guide
 Theresa Izeogu, Community Guide
 Victor Otutu, Community Guide
 Charles Chukwuma, Community Guide
 Maduabuchukwu Nwabueze, Community Guide
 Ugochukwu Wogbo, Community Guide
 Prince Chile Igbokwu, Community Guide
 Samuel Dick, Community Guide
 Onua Chinyere, Community Guide
 Wilson Gift, Community Guide
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 Eric Victor Godspower, Community Guide
 Nwaugha Okechukwu, Community Guide
 Nworgu Onyedikachi Prince, Community Guide
 Njoku Prince Udo, Community Guide
 Chinedu G. Nwankwo, Community Guide
 Nwala A. Amadi, Community Guide
 Friday San-Nen, Community Guide
 Cletus Bakor Mbari, Community Guide
 Zormuu Christopher, Community Guide
 Barinaagbaalo-Op Monsi, Community Guide
 Kinanee Taanadee, Community Guide
 Ogunka Nnamdi Kelvin, Community Guide
 John Ogbongbo, Community Guide
 Ene C. Iringe, Community Guide
 Benjamin Godgift, Community Guide
 Goodluck Tamunotoku, Community Guide
 Ateke Sunday, Community Guide
 Edmund Banigo, Community Guide
 Adiki Ibibia John, Community Guide
 Stephen Chimezie Owiriwa, Community Guide
 Amgbaduba Daniel, Community Guide
 Isreal W. Agbirigba, Community Guide

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 Nzene Monday Lebete, Community Guide
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 Brown Karapiribo-Ofori, Community Guide
 Sofeipirim F. Hart, Community Guide
 Appolus Matthew, Community Guide
 West Oluji Obeta, Community Guide
 Agbara Cyril Isaac, Community Guide
 Gomba Godspower, Community Guide
 Awa Susan Adamimi, Community Guide
 Elewa Fynah Ogoma, Community Guide
 Chukwu E. Sunday, Community Guide
 Wokeh Cyril Ikechi, Community Guide
 Boma Obeg, Community Guide
 Danlo Ayebaemi Goodluck, Community Guide
 Worlu F. Okocha, Community Guide
 Ichebadu Echem, Community Guide
 Sunny Odum, Community Guide
 Maxwell Amadi, Community Guide
 Oscar Karibi Siminalayi Jaja, Community Guide
 Jaja Emmanuel Bruce, Community Guide
 Rogers Ibibo, Community Guide
 Osimaa P. Whyte, Community Guide
 Ebenezer Dango Johnson, Community Guide
 West Alabo, Community Guide
 Maxwell Irisoanga Sekibo, Community Guide
 Lilian Otugbo, Community Guide
 Dokibo Albert, Community Guide
 Pst. Jeremial I. Bulongo, Community Guide
 Johnpaul Woruka, Community Guide
 Edith Edoghotu John, Community Guide
 Jonathan Sunday, Community Guide
 Emeh Kenneth, Community Guide
 Chinedu Francis, Community Guide
 Ordukwu Ozoemenam, Community Guide
 Promis Ibuchim Nlemogu, Community Guide
 Justice H. Woke-Kinika, Community Guide
 Acholonus Gift Onumbu, Community Guide
 Diepreye West, Community Guide
 Akonta Ediyekio, Community Guide
 Theresa Cotterell, Community Guide
 West Biokpo T.S., Community Guide
 Tekena Dapper, Community Guide
 Iderefama Braide, Community Guide
 Tubobelem Humphrey, Community Guide
 Syder Odwanivi Daniel, Community Guide
 Epow-Swei Sunday Soloman, Community Guide
 Ubulom Loveday James, Community Guide
 Herbert Isreal Herbert, Community Guide
 Usende Festus E, Community Guide
 Ogbidor Crowther, Community Guide
 Achugo Goddey Jackson, Community Guide
 Uwame Chima Samuel, Community Guide
 Ijah Uwhetu Godspower, Community Guide
 Willie Godbless, Community Guide
 Owobe Onyekwere, Community Guide
 Elo Imiete, Community Guide
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 Ismeal Suotor, Community Guide
 Wariboko Bright, Community Guide
 David Mercy, Community Guide
 Etire Okinaye, Community Guide
 Nwidoobee Wole, Community Guide
 Deesor Napiogi, Community Guide
 Nwikonzor Menekor Prince, Community Guide
 Igereh Paul Nwidum, Community Guide
 Aborlo Promise Ndoni, Community Guide
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 Okit E. Emmanuel, Community Guide
 Asuquo E. Emmanuel, Community Guide
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 Iferi Donatus Oyamo, Community Guide
 Eno Cosmos Tom, Community Guide
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 Offiong F. Ephraim, Community Guide
 Samuel E. Offiong, Community Guide
 Eyo Patrick Ene, Community Guide
 Offiong E. Bassey, Community Guide
 Okon Eyo Essien, Community Guide
 Esther Eyo, Community Guide
 Dorothy Ene, Community Guide
 Offiong A. Ita, Community Guide
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 Enyong Valentine, Community Guide
 Roselineine Udofot, Community Guide
 Uduak Okon, Community Guide
 Samuel T. Inyang (Ete Iwaat), Community Guide
 Margaret Umo Umo, Community Guide
 Ene Edet Okon, Community Guide
 Okon Asuquo Okon, Community Guide
 Iyene Edem, Community Guide
 Patience Bassey Eyoung, Community Guide
 Roland Ubi, Community Guide
 Ayei Sylvester Eni, Community Guide
 Usang Effiom Eteng, Community Guide
 Affiong Sunday Edet, Community Guide
 Wofai Ofem Egom, Community Guide
 Ibor Ofem Bassey, Community Guide
 Maria Amon, Community Guide
 Joseph Emmanuel, Community Guide
 Ekpong Natty, Community Guide
 Iyali Solomon, Community Guide
 Mary John, Community Guide
 Raphael Neji, Community Guide
 Eyang Ntun Eyang, Community Guide
 Takon Nsed, Community Guide
 Simon Arop, Community Guide
 Ayeiamon O. Omenka, Community Guide
 Nkim Ojong Nsan, Community Guide
 Cyril Ewu Okpa, Community Guide
 Augustine Eka Mathew, Community Guide
 Emmanuel Agbor Ojong, Community Guide
 Owan Patrick A., Community Guide
 Anthony Obi, Community Guide
 Awo Righteous, Community Guide
 Otu Kenneth, Community Guide
 Philips Abang, Community Guide
 Clifford Ofre Kekong, Community Guide
 Donald Tiku, Community Guide
 Ijoko O. Emmanuel, Community Guide

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Oko David Agabi, Community Guide	Okeke Charles Obinna, Community Mobilizer
Ogar Timothy I., Community Guide	Peter Chukwuweike Okolie, Community Mobilizer
Mary Gaga, Community Guide	Christiana Ozuah Obiageli, Community Mobilizer
Stephen Ashep, Community Guide	Nwaboh Mirian Azuka, Community Mobilizer
Cecilia Aruku, Community Guide	Chiezie N G Chiezie, Community Mobilizer
Joseph Ndifon, Community Guide	Okoye Nkiru, Community Mobilizer
David Obi, Community Guide	Ogu Caroline Nkechi, Community Mobilizer
Patrick Agida, Community Guide	Nweke Justina Chinyere, Community Mobilizer
Simon Okpe, Community Guide	Ewuzie Jennifer Chinelo, Community Mobilizer
Julianbenita Ogar, Community Guide	Umegboli Gladys Onyemaechi, Community Mobilizer
Emmanuel Odey, Community Guide	Onwujioji Andrew Ekenedirichukwu, Community Mobilizer
Abugbe Undiandeye, Community Guide	Ikeh Alphonsus Uwamezezie, Community Mobilizer
Robert Ashie, Community Guide	Okolo Kingsley C, Community Mobilizer
Philip Ekwetiong, Community Guide	Enemo Rebecca, Community Mobilizer
Wisdom Libeh, Community Guide	Obagha Onyedika Harrison, Community Mobilizer
Emmanuel Kayang, Community Guide	Onuora Mary Florentina (Rev. Sr.), Community Mobilizer
Boniface Abia, Community Guide	Nduka Roseann Amaka, Community Mobilizer
Christopher Akebke, Community Guide	Nnubia Vero Oluchi, Community Mobilizer
Abru Augustine, Community Guide	Ezeibe L.I., Community Mobilizer
David Ogomade, Community Guide	Okafor Modestus, State Based Mobilizer
Okwori Oko, Community Guide	Ezurike Edwin Okey, State Based Mobilizer
Odey Atukpa, Community Guide	Abanobi Felix Chinwe P., State Based Mobilizer
Odey Otegu, Community Guide	Mgborogwu Ijeoma, Community Mobilizer
Emmanuel Ebiale, Community Guide	Ezurike Maryann, Community Mobilizer
James Egede, Community Guide	E Gbuka Festus, Community Mobilizer
Kingsley Bassey, Community Guide	Orji Bettel Ikechukwu, Community Mobilizer
Angela, Community Guide	Ikenna Pamela C, Community Mobilizer
Effiong Holmes, Community Guide	Amadi Anthony, Community Mobilizer
Umoh Uwakmfon, Community Guide	Benneth Colette, Community Mobilizer
Jesam Bassey, Community Guide	Ikealugbu Nneka, Community Mobilizer
Pastor Sunny Nkanu, Community Guide	Okezie Juliana, Community Mobilizer
Akama Sam, Community Guide	Okafor Vivian, Community Mobilizer
Emeh Ekoro Ekpoto, Community Guide	Amadi Matthew, Community Mobilizer
Epoto Henry, Community Guide	Echeobina Adaku, Community Mobilizer
Fanny, Community Guide	Ihekarie Samuel, Community Mobilizer
Lawrence Slot Onang, Community Guide	Ugochukwu Caroline, Community Mobilizer
Enyi Urom, Community Guide	Arodiwe Victor, Community Mobilizer
Erom Uno, Community Guide	Nnamdi Bridget, Community Mobilizer
Prince Effiong Ekpenyong, Community Guide	Onyeagba Goodness, Community Mobilizer
Moses Aniefiok James, Community Guide	Njoku Chioma, Community Mobilizer
Innocent Ugunanim Ekpo, Community Guide	Akamadu Ngozi, Community Mobilizer
Nyong Ekpo Nyong, Community Guide	Ozims Stella, Community Mobilizer
Rosemary Effiom, Community Guide	Onwuliri Paschal, Community Mobilizer
Obo Effiom, Community Guide	Osueke Johnson, Community Mobilizer
Samuel Nya Okon, Community Guide	Admike Caroline, Community Mobilizer
Gabriel Okon, Community Guide	Agor Mary, Community Mobilizer
Victor Eyibio Nteri, Community Guide	Nwaorgu Assumpta, Community Mobilizer
South East Zone	Amadi Clara, Community Mobilizer
Osinachi Dim, Zonal Mobilizer	Iwuji Benedette, Community Mobilizer
Onwuka Edith Nkechi, Zonal Mobilizer & State Based Mobilizer	Onwuama Henrietta, Community Mobilizer
Okeke Johnbosco Nkemdilim, State Based Mobilizer	Nzepume Ikechukwu C, Community Mobilizer
Rejoice Oluchi U, State Based Mobilizer	Mary Ann Ezurike, Community Mobilizer
Okafor Nkiruka Juliana, Community Mobilizer	Okorie Esther, Community Mobilizer
Ementa Edmond Emeka, Community Mobilizer	Amadi Anthony, Community Mobilizer
Obiekwe Stella Ngozi, Community Mobilizer	Ejiofor Clementina, Community Mobilizer
Ikenna Onyekachukwu Awgu, Community Mobilizer	Maureen Obih, Community Mobilizer
Aduba Njideka Amalachukwu, Community Mobilizer	Chieke Christian, Community Mobilizer
Bernard I L, Community Mobilizer	Okolo Chidimma, Community Mobilizer
Obeche Ifeanyi, Community Mobilizer	Mkpuma Victor O, State Based Mobilizer

Nwali Benson O, State Based Mobilizer
 Ibiam Azu Agwu, State Based Mobilizer
 Vincent Uma, Community Mobilizer
 Sampson Nweke, Community Mobilizer
 Elom Isaac, Community Mobilizer
 Onyinye Oyudo, Community Mobilizer
 Abara Blessing, Community Mobilizer
 Mba Kate, Community Mobilizer
 Chima Emmanuel, Community Mobilizer
 Geradine Nweke, Community Mobilizer
 Nwafor Chukwunonso, Community Mobilizer
 Ogodo Arinze, Community Mobilizer
 Onwe Ubaka W., Community Mobilizer
 Ayoyo Uchenna, Community Mobilizer
 Josphine Chukwu N., Community Mobilizer
 Simeon Obiya, Community Mobilizer
 Inyimagu Joseph, Community Mobilizer
 Emma Nworie, Community Mobilizer
 Darlington Okwudili N., Community Mobilizer
 Clement Ogodo, Community Mobilizer
 Nweke Nebechi, Community Mobilizer
 Inya Emeka, Community Mobilizer
 Odah Ruth, Community Mobilizer
 Ikpor Nkechinyere, Community Mobilizer
 Oji Onyinyechi, Community Mobilizer
 Orji Ikechukwu, Community Mobilizer
 Elijah O. Uduma, Community Mobilizer
 Okike Felicia, Community Mobilizer
 Orji Theophilus, Community Mobilizer
 Emmanuel Ayowuo, Community Mobilizer
 Uneke Christiana, Community Mobilizer
 Ekw Francis, Community Mobilizer
 Elebe Elizabeth, Community Mobilizer
 Kalu Gold N., Community Mobilizer
 Rev. Jonathan Emenikeh, State Based Mobilizer
 John Ife Ajogwu, State Based Mobilizer
 Eze Martina Onuabuchi, State Based Mobilizer
 Mercy N Ezema, Community Mobilizer
 Eze Franklyn Onyekachukwu, Community Mobilizer
 Rita Ngozi Nwafor, Community Mobilizer
 Nwafor Onyebuchi M, Community Mobilizer
 Ezeoma Sylvanus Okechukwu, Community Mobilizer
 Onah Nkiruka Francisca, Community Mobilizer
 Aninwonye Patience Chinene, Community Mobilizer
 Sunday Samuel Okonkwo, Community Mobilizer
 Eze Fidelia Ndidiama, Community Mobilizer
 Ugwoke Nkeiruka Cynthia, Community Mobilizer
 Emmanuel Umeh Okafor, Community Mobilizer
 Onwuka Alfreda, Community Mobilizer
 Ugwu Georgina Ifeoma, Community Mobilizer
 Vvitor Onwura Nwagbo, Community Mobilizer
 Onuora Scholastica Ifeyinwa, Community Mobilizer
 Igwe Innocent, Community Mobilizer
 Nzekwe Stella Ifeyinwa, Community Mobilizer
 Esomchi Humphrey, Community Mobilizer
 Egwuagu Jude Okechukwu, Community Mobilizer
 Sampson Eze, Community Mobilizer
 Ene Sabina Ozoemena, Community Mobilizer
 Ogene Chiesonu Justina, Community Mobilizer
 Nnajiofor Cyril Osondu, Community Mobilizer
 Agbo Jude Obiorah, Community Mobilizer
 Ugwu Joy Anulika, Community Mobilizer
 Blessing O Onyema, Community Mobilizer
 Beatrice Ngozi Egu, Community Mobilizer
 Ugwu Charity Onyedika, Community Mobilizer
 Meniru Hamilton Chidozie, Community Mobilizer
 Ndie Grace Ngozichukwu, Community Mobilizer
 Amadi Babian Ufuoma, Community Mobilizer
 Offiah Ephraim Junior, Community Mobilizer
 Adama Josephine Obioma, Community Mobilizer
 Violet Ezenwali, Community Mobilizer
 Okoroafor Chineme Cynthia, State Based Mobilizer
 Samson Ugochukwu Joseph, State Based Mobilizer
 Joseph I. Anosike, State Based Mobilizer
 Ekeoma Chigozie Akidi, State Based Mobilizer
 Kigsely Okoro, Community Mobilizer
 Anosike Michael, Community Mobilizer
 Uloma Onwuso, Community Mobilizer
 Florence Agwu, Community Mobilizer
 Emilia Arisa, Community Mobilizer
 Chukwuma Nwabuko, Community Mobilizer
 Emilia Imaga, Community Mobilizer
 Ogbonne Okorie, Community Mobilizer
 Chinedu Nduke Uduma, Community Mobilizer
 Ochu Kalu, Community Mobilizer
 Uche Eni, Community Mobilizer
 Uchechi Oleka, Community Mobilizer
 Ihueze Joy, Community Mobilizer
 Lucky Meregin, Community Mobilizer
 Ijeoma Obasi, Community Mobilizer
 Kelechi Orji, Community Mobilizer
 Nkemjika Nneji, Community Mobilizer
 Ijeoma Okoro, Community Mobilizer
 Chioma Ehiemere, Community Mobilizer
 Paul Cherechi, Community Mobilizer
 Kalu Ihudiya Thelma, Community Mobilizer
 Happiness Adugba, Community Mobilizer
 Maduka Rita, Community Mobilizer
 Ejim Ndukwe, Community Mobilizer
 Ifeanyi Chimeze, Community Mobilizer
 Cynthia Emeonye, Community Mobilizer
 Ann Chioma Eze, Community Mobilizer
 Obasinta Caroline, Community Mobilizer
 Hope Onwumelu, Community Mobilizer
 Okpokiri Nkeiru, Community Mobilizer
 Onyeka Princewill Okorie, Community Mobilizer
 Chimezie Salvation, Community Mobilizer
 Ukoha-Eze Joy I, Community Mobilizer
 Patience Ekekwe, Community Mobilizer
 Precious Njoku, Community Mobilizer
 Rachael Alaribe, Community Mobilizer
 Onyeka Eze, Community Guide
 Nwofoe Joseph, Community Guide
 Nwora Ebere, Community Guide
 Nwosu Innocent, Community Guide
 Nwajiaku Emma, Community Guide
 Theo Nwangwu, Community Guide
 Arinze Ugochukwu, Community Guide
 Nwakwo Chidozie, Community Guide
 Ifeoma Okafor, Community Guide

Obi Onura Lucky, Community Guide	Patrick Udeze, Community Guide
Ifeakandu Umechukwu, Community Guide	Godwin Oraguih, Community Guide
Mgbakaogu Benjamin, Community Guide	Ezeanowai Chigozie, Community Guide
Egbuchiem Chiamaka, Community Guide	Obi Sunday, Community Guide
Orachusi Ngozi, Community Guide	Ofoma Sunday, Community Guide
Agabakoba Richard, Community Guide	Eme Okonkwo, Community Guide
Olisa Morah, Community Guide	Chidiebele Chikwueloka, Community Guide
Okechukwu Johnson, Community Guide	Okechukwu Celment, Community Guide
Ezenwanne Chizoba, Community Guide	Nnaemeka Chinedu, Community Guide
Nwazuluegbo Innocent, Community Guide	Ekwenze Nnemeka, Community Guide
Cletus Elemuo, Community Guide	Gibriel Ibekwe, Community Guide
Ozoh Christopher, Community Guide	Ude Ngozi, Community Guide
Lawerence Kene Okeke, Community Guide	Ani Ikechukwu, Community Guide
Nwosu Charles, Community Guide	Aniekwe Chukwuebuka, Community Guide
Nwokoye Eziekel, Community Guide	Okafor Sunday, Community Guide
Obanaka Jude, Community Guide	Paschal Godfrey, Community Guide
Emeka Okezie, Community Guide	Odina Peter, Community Guide
Okoye Christian, Community Guide	Okonkwo Ngozi Joy, Community Guide
Ositadimma Okechukwu, Community Guide	Eto, Community Guide
Ubong Sunday, Community Guide	Luke Ezeji, Community Guide
Okoye Kenechukwu, Community Guide	Nweke Sunday, Community Guide
Uchechukwu Kingsley O., Community Guide	Ifezue Jerimaih, Community Guide
Agada Onu, Community Guide	Onuwa Obiaesie, Community Guide
Obiagulu Mugosiobo, Community Guide	Ezeagha Daniel, Community Guide
Nliam Ifeanyi, Community Guide	Beatrice Okonkwo, Community Guide
Godwin Ikem, Community Guide	Mbanefo Ideh, Community Guide
Mbaneme Chukwudi, Community Guide	Christian Opala, Community Guide
Bona Nwosu, Community Guide	Okoye John, Community Guide
Prince Okwelogo A., Community Guide	Anowai Rapheal, Community Guide
Obidiegwu Diamain, Community Guide	Emma Ihekwe Emma, Community Guide
Ambrose Obimo, Community Guide	Peter Chukwudi, Community Guide
Ifejiaka Chiwado, Community Guide	Chidiebere Iwuchukwu, Community Guide
Ekwunife Ifesinachi, Community Guide	Nwoko Christopher, Community Guide
Okechukwu Iloanya, Community Guide	Nwosu Malachi, Community Guide
Aniekwe Ewello, Community Guide	Ugwumba Onwulili, Community Guide
Chinyere Onyekwelu, Community Guide	Gabriel Osuagwu, Community Guide
Hon. Julius Uchekwe, Community Guide	Vi Aguecheta, Community Guide
Chinedu Anene, Community Guide	Chukwuma Edmond, Community Guide
Hon. Basil Ateli, Community Guide	Onwuzurike Ugochukwu, Community Guide
Anayo Nwajide, Community Guide	Sampson Amaechi, Community Guide
Iloani Mattew, Community Guide	Chidiebere Uzoamaka, Community Guide
Anagor Chizoba, Community Guide	Gadriel Ottih, Community Guide
Okafor Samuel, Community Guide	Raymond Ogbuji, Community Guide
Vincent Nwasike, Community Guide	Okeukwu Ruth, Community Guide
Odigbo Peter, Community Guide	Ononikpo Nkiruka, Community Guide
Orefo William, Community Guide	Adaku Ojimba, Community Guide
Muokwe Onuorah, Community Guide	Ekereonyeonwu Joy, Community Guide
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Anthony Chukwudube, Community Guide	Uzoukwu Chinyere, Community Guide
Ibekwe Josaih, Community Guide	Eric Egeruo, Community Guide
Ezeamama Patirck, Community Guide	Joseph Okoro, Community Guide
Agagwo Fransis, Community Guide	Christian Onuoha, Community Guide
Nwadinaobi Chika, Community Guide	Chibuzo Oguoro, Community Guide
Chikwu Benarad, Community Guide	Hellen Duru, Community Guide
Onumonu Lazerus, Community Guide	Rapheal Mba, Community Guide
Onyemechi Oraegbunam, Community Guide	Livinus Anyakudo, Community Guide
Uju Ugochukwu, Community Guide	Juliana Iwuanyanwu, Community Guide
Emengini Nwankwo B., Community Guide	Onumegbu Gregory, Community Guide
Shederake Ifeaku, Community Guide	Grace Ahuchi, Community Guide
Pual Akaosa, Community Guide	Peter Ijeoma, Community Guide

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Igbo Cyril, Community Guide	Innomia Maduagwu, Community Guide
Obinna Okani, Community Guide	Mr. Alex Nwaozuzu, Community Guide
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Ikwo Flavin, Community Guide	Ebuka Godwin, Community Guide
Onugha Jideofor, Community Guide	Cecilia Egbonu, Community Guide
Cliford Nwanoke, Community Guide	Thaddeus Asiegbu, Community Guide
Samuel Okonkwo, Community Guide	Rita Odume, Community Guide
Purity Nnamdi, Community Guide	Ndubuisi Ogechi, Community Guide
Ogochi Dike, Community Guide	Duru Jude, Community Guide
Chibuike Ohueokpu, Community Guide	Ukazu Fortunatus, Community Guide
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Charity Umezurike, Community Guide	Vincent Nwege, Community Guide
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Mbagwu Calista, Community Guide	Francis Nwogha, Community Guide
Felix Ekezie, Community Guide	Victor Nwigube, Community Guide
Davidson Oguebuka, Community Guide	Prince Hycienth Alieze, Community Guide
Samuel Onyego, Community Guide	Patrick Okoye, Community Guide
Grace Anyelle, Community Guide	Okoche Ugwu, Community Guide
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Agujiobi Charles, Community Guide	Uche Ken Akwuba, Community Guide
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Iheanaeho Aloysius, Community Guide	John Igwe Jack, Community Guide
Ozuruigbo Chinasa, Community Guide	Janet Eseni Ama, Community Guide
Ann Emeh, Community Guide	Orji Chukwu, Community Guide
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Opara Rapheal, Community Guide	John Nwochi, Community Guide
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Adiukwu Happiness, Community Guide	Nwamkpu Timothy, Community Guide
Ejim Madu, Community Guide	Nwali Jeremaiah, Community Guide
Chukwuebuka Hyginus, Community Guide	Nwali Ijeoma, Community Guide
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Iwunze Eucharia, Community Guide	Igboke Vincent N., Community Guide
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Onwumere Anthony, Community Guide	Chukwuma Mbam, Community Guide
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Daniel Ugo, Community Guide	Nwoku Chinene, Community Guide
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Opuraiwu Francisca, Community Guide	Aligbo Cletus, Community Guide

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 Oke Chukwuma Joseph, Community Guide
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 Tony Dickson, Community Guide
 Ajah John Chibuike, Community Guide
 Joshua Obasi, Community Guide
 Michael Onyinyechi, Community Guide
 Nwibo Nwachi Ogbonna, Community Guide
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 Jude Nwogha, Community Guide
 Nwibo Michael, Community Guide
 Angel Pius, Community Guide
 Alieze Ugochukwu, Community Guide
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 Ogodo Hycient, Community Guide
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 Ndudi Kenechi, Community Guide
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 Ugadu Innocent, Community Guide
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 Ituma James Ubuchi, Community Guide
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 Nwanga Esther, Community Guide
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 Sunday Amos, Community Guide
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 Pius Chukwu, Community Guide
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 Omech Chukwudi, Community Guide
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 Omeh Emmanuel, Community Guide
 Usman Ikedichukwu Eze, Community Guide
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 Eugene Idoko, Community Guide
 Okpe Ambrose, Community Guide
 Boniface Eze, Community Guide
 Egwu Kenneth, Community Guide
 Eze Jude, Community Guide
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 Nnamchi Alloysius, Community Guide
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 Enoch Ugwu, Community Guide
 Odo Emmanuel, Community Guide
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 Ozioma Ezugwu, Community Guide
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 Emeka Omeje, Community Guide
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 Ozotta Alfred, Community Guide
 Onyishi Fidelis, Community Guide
 Afam Odo, Community Guide
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 Ikechukwu Cletus Ifeanyi, Community Guide
 Ekwueme Sylvester Okafor, Community Guide
 Chioma Okongwu, Community Guide
 Chidera Nebokike, Community Guide
 Akwusie Uche, Community Guide
 Adolphus Ani, Community Guide
 Ephraim Madubueze, Community Guide
 Mathias Ojukwu, Community Guide
 Engr. Chris Ojoto, Community Guide
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 Aniagbo Purity, Community Guide
 Innocent, Community Guide
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 Azuka Amalinze, Community Guide
 Monday & Chibueze, Community Guide
 Chibuzo Nnam, Community Guide
 Michael Ugwumba, Community Guide
 Ogbu Ikechukwu, Community Guide
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 Onyia Maureen, Community Guide
 Chinenyen Obute, Community Guide
 Madu Ijeoma, Community Guide

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 Ngwu Chukwuebuka, Community Guide
 Eze Chinenye, Community Guide
 Solomon Nweke, Community Guide
 Ene Josephine, Community Guide
 Aniugwu Alloysius, Community Guide
 Nnam Chijioke S, Community Guide
 Ikechukwu Ede, Community Guide
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 Chidi Owoene, Community Guide
 Okafor Chikamso, Community Guide
 Zelwa Onuoha, Community Guide
 Ibe Kenneth, Community Guide
 Joseph Ezie, Community Guide
 Ume Anuo Darlington, Community Guide
 Francis Onwuaji, Community Guide
 Obiekpo China, Community Guide
 Onyeka Ikechukwu, Community Guide
 Chidubem Jonah, Community Guide
 Ijeoma Omenazu, Community Guide
 Elder Onyenweaku C, Community Guide
 Merit Anaba, Community Guide
 Uguru Ejere, Community Guide
 Chukwu Orji, Community Guide
 John Chukwu, Community Guide
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 Agwu Ogbu Ukoji, Community Guide
 Prince Uduma Uka, Community Guide
 Odo City, Community Guide
 Collins Chidi, Community Guide
 Chinaza Nwachukwu, Community Guide
 Marvelous Ekpenu, Community Guide
 Uzoma Nwauzor, Community Guide
 Eze Ogbonna, Community Guide
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 Prince Godwin Njoku, Community Guide
 Owuala Azubike, Community Guide
 Prince Uzoma Asonye, Community Guide
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 Amos Okore, Community Guide
 Okkore Nwankwo Ifi, Community Guide
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 Nnenna Agwu, Community Guide
 Orieji Nmpong, Community Guide
 Micheal Orji Ogudu, Community Guide
 Stanley Oriaku, Community Guide
 Teddy, Ogbonna, Community Guide
 Nandu Chima, Community Guide
 Collins Chucks, Community Guide
 Ogbonna Nwadiobi, Community Guide
 Ekuribe Ejike, Community Guide
 Igwe Endurance, Community Guide
 Nwakama Arthur, Community Guide
 Enyinnaya Alilionwu, Community Guide
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 Chief Chinatu Nwosu, Community Guide
 Deacon Uche Festus, Community Guide
 Emeka Ugwumba, Community Guide
 Anayo Ukaumunna, Community Guide
 Emeka Alozie, Community Guide
 Izuchukwu Ida, Community Guide
 Chima Anthony, Community Guide
 Uche Mary, Community Guide
 Pst. Abraham Promise, Community Guide
 Obinna Awazie, Community Guide
 Ndubuisi Mgbeahuru, Community Guide
 Uloma Nwala, Community Guide
 Naomi Friday, Community Guide
 Bright Ezigbo, Community Guide
 Chigozie Nze, Community Guide
 Okafor Emmanuel, Community Guide
 Godwin, Community Guide
 Ikechukwu Ukeje, Community Guide
 Emeka Ihedinma, Community Guide
 Nwandire Ogumbuaja, Community Guide
 Samuel Otuonye, Community Guide
 Osundu Chukwuemeka, Community Guide
 James Ogbonna A, Community Guide
 Nwosu Basil, Community Guide
 Love Kanu, Community Guide
 Ugoeze Egege, Community Guide
 Rutherford Eluwa, Community Guide
 Christopher Nteh, Community Guide
 Chief Chigbu Odimuko, Community Guide
 Ubabuoke Nwosu, Community Guide
 Ikechukwu Amaike, Community Guide
 Nwaogu Friday, Community Guide
 Chisom Sunday, Community Guide
 Joel Obioma Osodu, Community Guide
 Akpam Abara, Community Guide
 Osundu Chukwuemeka, Community Guide
 Orji Joseph, Community Guide
 Chimere Uka, Community Guide
 Ibeabuchi Luke Ngozi, Community Guide
 Chukwudi Ogu, Community Guide
 Chief Peter Nwogwugwu, Community Guide
 Edmond Isaac I, Community Guide
 Maduforo Gaius, Community Guide
 Chief Nwaeze Ukaumunna, Community Guide
 Nwadiala Dike, Community Guide
 Saturday Ogbonna, Community Guide
 Gift Ubani, Community Guide
 Gold Ikechi, Community Guide
 Anne Nwanne, Community Guide
 Ogechi Geoffrey, Community Guide
 Isreal Izuogu, Community Guide
 Micheal Ogbonna, Community Guide
 Amarachi Ogbonnaya, Community Guide
 Esther John, Community Guide
 Rita Nwachukwu, Community Guide
 Obi Chigozie, Community Guide

Anugbo F. U., Community Guide
 Igbo Joyce, Community Guide
 Nwakama Okugbua, Community Guide
 Ikechukwu Ahamba, Community Guide
 Ako Nwakama, Community Guide
 Chinwendu John, Community Guide
South West Zone
 Dr. Olubunmi Ayinde, Zonal Mobilizer
 Ekundayo Olajumoke Kemi, State Based Mobilizer
 Ajayi Oluwabaigbe Remi, State Based Mobilizer
 Aderonke Adefolaju, State Based Mobilizer
 Oladunjoye Taiwo Elizabeth, State Based Mobilizer
 Babatunde, Community Mobilizer
 Temitope Adesuyi, Community Mobilizer
 Mercy Oluwatoyin Olotu, Community Mobilizer
 Abiodun T Ayinde, Community Mobilizer
 Oluwabukola Adedeji, Community Mobilizer
 Owoeye Ronke Ajoke, Community Mobilizer
 Fabunmi Elizabeth Bukola, Community Mobilizer
 Florence Yemisi Ajiboye, Community Mobilizer
 Love Ogundipe, Community Mobilizer
 Stella Ireti Aluko, Community Mobilizer
 Abraham Fagbemi, Community Mobilizer
 Dada Dupe Tunde, Community Mobilizer
 Kayode Owoso, Community Mobilizer
 Adeyemi Stephanie Ajumobi, Community Mobilizer
 Mohammed Ismaila, Community Mobilizer
 Fasusi Felicia Adeleye, Community Mobilizer
 Akomolafe Elijah Olukayode, Community Mobilizer
 Ilesanmi Bosede Veronica, Community Mobilizer
 Adeola Patricia Olayinka, Community Mobilizer
 Mrs. Dorcas Olubukola Oladiipo, Community Mobilizer
 Mrs. Florence Adebayo Olabisi, Community Mobilizer
 Oyerinde Toluwase Funke, Community Mobilizer
 Oluwumiju Kikelomo, Community Mobilizer
 Mrfajeminigba David, Community Mobilizer
 Mrs. Adewemimo Tolulope A, Community Mobilizer
 Mr. Idowu Olasunkanmi Timothy, Community Mobilizer
 Mrs. Adalumo Comfort Abeke, Community Mobilizer
 Mrs. Adeniyi Oluwatoyin, Community Mobilizer
 Fagbohun Itunu, Community Mobilizer
 Ogunsakin Anike Sanmi, Community Mobilizer
 Agwuaghah Chinyere Elechi, Community Mobilizer
 Akinola Eunice, Community Mobilizer
 Jumoke Ayoade, Community Mobilizer
 Bukola Ajayi, State Based Mobilizer
 Ilawole Olubunmi, State Based Mobilizer
 Sulaimon Rasaq Adegboyega, State Based Mobilizer
 Usman Abdul Waheed, State Based Mobilizer
 Hon. Aladeyelu Azeez Adebayo, State Based Mobilizer
 Orolugbagbe Modupe, Community Mobilizer
 Kajola Abiodun Mujidat, Community Mobilizer
 Awodumila Dupe Stella, Community Mobilizer
 Animasaun Teslim Akorode, Community Mobilizer
 Finnih Oluwatoyin Adenike, Community Mobilizer
 Ayinde Mudashiru Bolaji, Community Mobilizer
 Sanni-Afolabi Olanike Rashidat, Community Mobilizer
 Ijaoba Nurudeen Babatunde, Community Mobilizer
 Seriki Basirat M, Community Mobilizer
 Fadipe Olayinka Sarat, Community Mobilizer

Fatunbi-Lawali Oluwatoyin, Community Mobilizer
 Olarinde Titilayo, Community Mobilizer
 Kowiu-Kazeem Patricia Aderemi, Community Mobilizer
 Akinwunmi Omodele Olatunji, Community Mobilizer
 Alao Tawakalitu Adejoke, Community Mobilizer
 Ogunyemi O. Taiwo, Community Mobilizer
 Olaoye Charles S, Community Mobilizer
 Duwoju Temilola Christianah, Community Mobilizer
 Odufuye Adedayo, Community Mobilizer
 Ahmed Ogundipe M.F, Community Mobilizer
 Adeyemi Zainab Romoke, Community Mobilizer
 Ekerin Adebukola Lateefat, Community Mobilizer
 Usman Balikis Olaide, Community Mobilizer
 Okeowo Shakirat Titilope, Community Mobilizer
 Wakilat Muhammad, Community Mobilizer
 Airat Dupeola Kolawole, Community Mobilizer
 Olawole Abiola O., Community Mobilizer
 Francisco Feyinfozu, Community Mobilizer
 Elizabeth Olapeju, Community Mobilizer
 Fakunle Temitope Luk An, Community Mobilizer
 Adepeju Adebimpe Raji, Community Mobilizer
 Folami Adenike Oluwaranti, Community Mobilizer
 Ochowechi Vincent, Community Mobilizer
 Alao Tawakalitu Adejoke, Community Mobilizer
 Akinterinwa Temitope, Community Mobilizer
 Badejo Ireti, Community Mobilizer
 Honfor Grace Adesola, Community Mobilizer
 Japhet Chinedu, Community Mobilizer
 Olushola-Jimoh Tolulope Adebanté, State Based Mobilizer
 Oladele Folasade Adeseun, State Based Mobilizer
 Ogunkunle Titilade, State Based Mobilizer
 Adio Olusegun, Community Mobilizer
 Tunde Onajonwo, Community Mobilizer
 Onifadeenitan, Community Mobilizer
 Ibrahim B.I., Community Mobilizer
 Adebisi Toyin, Community Mobilizer
 Femi Olubisi, Community Mobilizer
 Olorunfemioluwayakayode, Community Mobilizer
 Oguntola Remi, Community Mobilizer
 Gidado Kehinde Yusuff, Community Mobilizer
 Dare Adaramoye, Community Mobilizer
 Shotonwa-Roagess O.M, Community Mobilizer
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 Mayowa Adeyemi, Community Mobilizer
 Taiwo Abioye, Community Mobilizer
 Oladeji Adenike, Community Mobilizer
 Akinrin Adetosin, Community Mobilizer
 Titi Ajibola, Community Mobilizer
 Ayomo Folakemi, Community Mobilizer
 Bolanle-Ojoo Tope, Community Mobilizer
 Moses Adedokun, Community Mobilizer
 Owolabi Funmilayo, Community Mobilizer
 Joseph Ejekere, Community Mobilizer
 Olaniran Sarah, Community Mobilizer
 Okesina Adebare, Community Mobilizer
 Ogunrinde D.A., Community Mobilizer
 Babalola Florence, Community Mobilizer
 Salami O.O., Community Mobilizer
 Wale Akanbi, Community Mobilizer
 Adetoye Funmilayo, Community Mobilizer

Olutayo Adisa, Community Mobilizer
 Alawode Oluwatoyinwunmi, Community Mobilizer
 Adedeji R.A., Community Mobilizer
 Fatoki Helen, Community Mobilizer
 Ogunlade Victoria, Community Mobilizer
 Adegoke A.T., Community Mobilizer
 Ojeladedaniel Taiwo, Community Mobilizer
 Adeleke R.O., Community Mobilizer
 Bola Olarenwaju, Community Mobilizer
 Titilola Rotimi, Community Mobilizer
 Sunday Olaniyi Adeniyi, Community Mobilizer
 Tajudeenadetunji, Community Mobilizer
 Ipadeola Rasheed Lasun, Community Mobilizer
 Salawudeennurat, Community Mobilizer
 Adedeji Iyabo Nike, Community Mobilizer
 Shaibu Olajire, Community Mobilizer
 Olawunmi Adeyinka, Community Mobilizer
 Utene Pauline, Community Mobilizer
 Babalola Motunrayo Kudirat, State Based Mobilizer
 Ayanniyi Temidayo, State Based Mobilizer
 Bolanle Durosomo, State Based Mobilizer
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 Agemo Margaret Ruth, Community Mobilizer
 Dasaolu Oluwakemi O., Community Mobilizer
 Bisiriyu Felicia Abosede, Community Mobilizer
 Osunfowora Bolanle R., Community Mobilizer
 Mustapha Mariam M., Community Mobilizer
 Lawal Olajumoke Monsurat., Community Mobilizer
 Adeniji Olufunke Elizabeth, Community Mobilizer
 Oyekan Ogundeleji C.B., Community Mobilizer
 Gbadamosi Rafiat, Community Mobilizer
 Adesina Olusesan Temitoe, Community Mobilizer
 Tomori Olawunmi, Community Mobilizer
 Abiodunabiodun A., Community Mobilizer
 Aito Adejoke Olubunmi, Community Mobilizer
 Opeoluwa Yetunde Veronica, Community Mobilizer
 Adesoga Oluwakemi Victoria., Community Mobilizer
 Mosudi Omolara Risikat, Community Mobilizer
 Sokoya Bosede Esther, Community Mobilizer
 Adekola Adebola Tanwa, Community Mobilizer
 Amusan Gideon Adepegba, Community Mobilizer
 Soyinka Abosede Oluwakemi, Community Mobilizer
 Ajibade Oluwaseun, Community Mobilizer
 Rome Shadrack Olaoluwa., Community Mobilizer
 Aregbesola Sixtus Moore, Community Mobilizer
 Adeogun Modupeola Oluwatoyin, Community Mobilizer
 Funmilayo A. Hassan, Community Mobilizer
 Agboola Oladoyin, Community Mobilizer
 Ayomide Oluwatosin, Community Mobilizer
 Olusanya Toyin, Community Mobilizer
 Shoniran Hafiz Olanrewaju, Community Mobilizer
 Babalola Olalekan Sunday, Community Mobilizer
 Opaleye Jones Olumuyiwa, Community Mobilizer
 Popoola Faidat Abiodun, Community Mobilizer
 Okediran Abiola Monsurat, Community Mobilizer
 Samson Toluwalope Banjo, Community Mobilizer
 Ajilore Olusegun Johnson, State Based Mobilizer
 Oyelere Bukola Esther, State Based Mobilizer
 Adeleke Kazeem Adeyinka, State Based Mobilizer

Mr. Adeniran Adegoke, Community Mobilizer
 Oyeniran A.A., Community Mobilizer
 Oladunmoye B.I., Community Mobilizer
 Omotomilola Kayode, Community Mobilizer
 Fala R.O., Community Mobilizer
 Yusuf Ganiyat, Community Mobilizer
 Obajemu F.A., Community Mobilizer
 Taiwo A.A, Community Mobilizer
 Oroleye G.A., Community Mobilizer
 Oladele Sikiru, Community Mobilizer
 Adebayo B.S., Community Mobilizer
 Haleem L.O., Community Mobilizer
 Fabiyi E.A., Community Mobilizer
 Bamidele C.B., Community Mobilizer
 Ajibike E.O., Community Mobilizer
 Fakokunde, Community Mobilizer
 Ojuola O.L., Community Mobilizer
 Akinloye, Community Mobilizer
 Adedapo Kemi, Community Mobilizer
 Dosumu K., Community Mobilizer
 Opesetan C.A, Community Mobilizer
 Olaniyi, Community Mobilizer
 Adewale Aliyat O, Community Mobilizer
 Mr. Ademola Adebisi, Community Mobilizer
 Olufemi Oyeremi, Community Mobilizer
 Banji Oladipo, Community Mobilizer
 Ololade Osunfisan, Community Mobilizer
 Monsurat Oluwakemi, Community Mobilizer
 Orolakin Adetoro Yahaya, Community Mobilizer
 Omoyle Oluwaseun Omotola, Community Mobilizer
 Olatunde Ajayi, Community Mobilizer
 Sadugba Tolulope Abosede, Community Mobilizer
 Mercy Awojobi, Community Mobilizer
 Odewole Clement, Community Mobilizer
 Oladipo Olawumi Yetunde, Community Mobilizer
 Falaye Oyeyemi, Community Mobilizer
 Olanrewaju Ojo, Community Mobilizer
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 Abdullahi Alhassan Ahmed, Community Mobilizer
 Milkatu Habila, Community Mobilizer
 Muhammad Abdussalam, Community Mobilizer
 Isa Ali Barde, Community Mobilizer
 Jibril Ibrahim, Community Mobilizer
 Bukar Hammadu, Community Mobilizer
 Ahmed M Bello, Community Mobilizer
 Yerima Lawan, Community Mobilizer
 Mallam Alhaji Ali, Community Mobilizer
 Bukar Mallam Shehu, Community Mobilizer
 Umar Ali, Community Mobilizer
 G Mohammed Alhassan, Community Mobilizer
 Sagiru Mohamed, Community Mobilizer
 Auwalu Abba Hussein, Community Mobilizer
 Alhaji Baba Sadiq, Community Mobilizer
 Mutari Aliyu, Community Mobilizer
 Muhammad Adamu, Community Mobilizer
 Adamu Ali Yerima, Community Mobilizer
 Alhaji Lumo Tagali, Community Mobilizer
 Umar Baba Zarami, Community Mobilizer
 Mohammed Isa, Community Mobilizer
 Mohammed Audu, Community Mobilizer
 Jambaima Wakkil, Community Mobilizer
 Mahmoud Aliyu El-Nafaty, State Based Mobilizer
 Fatima Maisamari, State Based Mobilizer
 Alh. Ahmed Yusuf, State Based Mobilizer
 Dauda Mohammed, Community Mobilizer
 Hassan Ibrahim Y, Community Mobilizer
 Abdulkadir Mohd Kwainga, Community Mobilizer
 Ahmed Bello Maikano, Community Mobilizer
 Usman Mohammed Bello, Community Mobilizer
 Sanusi M Ahmad, Community Mobilizer
 Aminu Mohd Gidado, Community Mobilizer
 Epson Sokka, Community Mobilizer
 Joshua Mistaki, Community Mobilizer
 Mariam Timza, Community Mobilizer
 Luraiwa Williams, Community Mobilizer
 Ibrahim Sulaiman, Community Mobilizer
 Nanatu Naphtali, Community Mobilizer
 Abdulrahman Isah, Community Mobilizer
 Usman Umar Yari, Community Mobilizer
 Mohammed Kabiru, Community Mobilizer
 Abdulrazaq Abubakar Ahmad, Community Mobilizer
 Abdulqadir Mohammad, Community Mobilizer
 Mohammed Ajija, Community Mobilizer
 Usman Salisu, Community Mobilizer
 Tanko Abe Aji, State Based Mobilizer
 Sayya Aliyu Gassol, State Based Mobilizer
 Anthony Garba Dorofin, State Based Mobilizer
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 Misah Jidda, Community Mobilizer
 Faiza M Nuhu, Community Mobilizer
 Adenyong M Kusho, Community Mobilizer
 Dominic William, Community Mobilizer
 Joel Zando, Community Mobilizer
 Angyu A Kindama, Community Mobilizer
 Felicity Andokari, Community Mobilizer

Joseph Luka, Community Mobilizer
 Abdullahi Garba, Community Mobilizer
 Abubakar Umar, Community Mobilizer
 Sallau Isa, Community Mobilizer
 Zakarya B Nantsirde, Community Mobilizer
 Johnson Hussaini, Community Mobilizer
 Karimu Maman Ali, Community Mobilizer
 Davidson Amos Dulums, Community Mobilizer
 Saidu Hassan, Community Mobilizer
 Naomi Joshuas, Community Mobilizer
 Tanko M Nawa, Community Mobilizer
 Dangari A Aminu, Community Mobilizer
 Dahiru A Musa, Community Mobilizer
 Umar A Lawal, Community Mobilizer
 Saraya Bello, Community Mobilizer
 Emmanuel Yakubu, Community Mobilizer
 Sa'ad M Isa, Community Mobilizer
 Danboyi Rimamtari, Community Mobilizer
 Isa I Jika, Community Mobilizer
 Bitrus Bello, Community Mobilizer
 Nami Musa, Community Mobilizer
 Farah N. James, State Based Mobilizer
 Mahmuda Inuwa, State Based Mobilizer
 Yahaya Adamu, State Based Mobilizer
 Mohammed Mahmud, State Based Mobilizer
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 Yakubu Vandi, Community Mobilizer
 Tuwanga Peter Maijama'a, Community Mobilizer
 Rurudeen Ibrahim, Community Mobilizer
 Halilu Abubakar, Community Mobilizer
 Joice Takoba, Community Mobilizer
 Abraham Gabs, Community Mobilizer
 Bala Mohammad, Community Mobilizer
 Ismail Mohammed, Community Mobilizer
 Philip Agabus, Community Mobilizer
 Kauli Jarayala, Community Mobilizer
 Mitkoko Elam, Community Mobilizer
 Yahya Abba, Community Mobilizer
 Moh'd K. Bala, Community Mobilizer
 Ahmed Y. Sule, Community Mobilizer
 Zamnan Hamidu Audu, Community Mobilizer
 Aliyu Umar, Community Mobilizer
 Aishatu Bamanga, Community Mobilizer
 Bello Bamanga, Community Mobilizer
 Bello Bako, Community Mobilizer
 Hayatu Zabairu, Community Mobilizer
 Yahya Kabiru Moh, Community Mobilizer
 Bala Angelo, Community Mobilizer
 Tanimu Nasiru, Community Mobilizer
 Polycarp Levi Jediel, Community Mobilizer
 Ladabi Daniel, Community Mobilizer
 Umar Abubakar, Community Mobilizer
 Solomon John, Community Mobilizer
 Bashir Mohammed Modibbo, Community Mobilizer
 Samuel Pulyso Sambo, Community Mobilizer
 M Isa Mohammed, Zonal Mobilizer
 Naomi Titus Dauda, Zonal Mobilizer
 Abubaka Musa, Zonal Mobilizer
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Yusuf Salihu, Community Guide	Alhaji Danlami, Community Guide
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Ali Mai Shinkafa, Community Guide	Ahmad Mohammed, Community Guide
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 Adamu Ahmadu, Community Guide
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 Bala Nuhu, Community Guide
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 Lukman Abdullahi, Community Guide
 Umar Shaibu, Community Guide
 Abdullahi Abubakar, Community Guide
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 Ayuba Mongaring Shehu, Community Guide
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 Absolom Y Baka, Community Guide
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 Bitrus Takwaf, Community Guide
 Danlami Hamma, Community Guide
 Cain Maiganga Lamdam, Community Guide
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 Usman Muhammadu, Community Guide
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 Mr. Adamu Ali, Community Guide
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 Murtala Wawe, Community Guide
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 Miriam Yuwel Timza, Community Guide
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 Abdulrahman Isah, Community Guide
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 Harisu Ibrahim, Community Guide
 Dennis Wundeng, Community Guide
 Danladi Ajiya, Community Guide
 Abubakar G Mohammed, Community Guide
 Yabkwawa Rimande, Community Guide
 Mamman Useni, Community Guide
 Tanko Mohammed, Community Guide
 Ibrahim Iliyasu, Community Guide
 Paul Emmanuel, Community Guide
 Ibrahim Abubakar, Community Guide
 Peter Biko, Community Guide
 Mustapher Abubakar, Community Guide
 Dahiru Umar, Community Guide
 Mustapher Adamu, Community Guide
 Masudu Ibrahim, Community Guide
 Umar Sabo, Community Guide
 Haruna S Daro, Community Guide
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 Kachalla Namiri, Community Guide
 Abdulrazak Sulaiman, Community Guide
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 Lukas Mashi, Community Guide
 Kasong Samuel, Community Guide
 Ishaya Yanga, Community Guide
 Donatus Kwanti, Community Guide
 Tobious Klah, Community Guide
 Donatus Buba, Community Guide
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 Kuristsi Ikimbafan, Community Guide
 Daniel Andenyang, Community Guide
 Danladi Sambo, Community Guide
 Galadima Kumar, Community Guide
 Abbas Kasimu, Community Guide
 Steven Nubalga, Community Guide
 Shingwa Nuchanu Emmanuel, Community Guide
 Emmanuel U Ikoh, Community Guide
 Shadow Kabea, Community Guide
 Adamu / Gwafwe Danjuma, Community Guide
 Funga Jonathan, Community Guide
 Emmanuel Buba, Community Guide
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 Boyi Mbria, Community Guide
 Sunji Umaru, Community Guide
 Aberchi Audu, Community Guide
 Rimantanum Boyi, Community Guide
 Hafsat Sule, Community Guide
 Nuhu Muhammed, Community Guide
 Ibrahim Saadu, Community Guide
 Usman Tomas, Community Guide
 Saidu Isa, Community Guide
 Emmanuel Japhet, Community Guide
 Suleiman Saidu, Community Guide
 Muhammed S Hamidu, Community Guide

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Saidu Ibrahim, Community Guide	Yunana Jidauna, Community Guide
Yakubu Kaseun, Community Guide	Peter Anthony, Community Guide
Yakubu Jeremiah, Community Guide	Michael Musa Loko, Community Guide
Hashimu Maihula, Community Guide	Maxwell Chaslan, Community Guide
Sa'adu Lauya, Community Guide	Auwalu Ibrahim, Community Guide
Abdullahi Mairiga, Community Guide	Diana Emmanuel, Community Guide
Abenda Lahaga Sabastine, Community Guide	Rahima Isa, Community Guide
Shittu Mohammed, Community Guide	Benham Musa, Community Guide
Istifanus Mvendaga, Community Guide	Friday Stephen, Community Guide
Hamidu Teler, Community Guide	Abubakar T.J. Sale, Community Guide
Babangida Bello, Community Guide	Ezra Samson Audu, Community Guide
Maigari Audi, Community Guide	Abubakar Bello, Community Guide
Enoch Tormusa, Community Guide	Adadiyon Dumne, Community Guide
Rufai Danjum A, Community Guide	Mansur Moh'd, Community Guide
Zayyanu Sanusi, Community Guide	Adam Ahmadu Adam, Community Guide
Joshua Dantani, Community Guide	Suleiman Abubakar, Community Guide
Christopher Garbiya Saasu, Community Guide	Penuel Dabal, Community Guide
Emmanuel Dauda, Community Guide	Farida Abdullahi, Community Guide
Sanfo Danladi, Community Guide	Faisal Gidado, Community Guide
Ishaku Isa Bello, Community Guide	Ibrahim Dalhatu, Community Guide
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Andrew Barsheba, Community Guide	Zaham Zakariya, Community Guide
Suleiman Iliyasu, Community Guide	Ladipwety Enderly, Community Guide
Adamu Audu, Community Guide	Gaddafi Mohammed, Community Guide
Isa Ali, Community Guide	Umar Sa'ad, Community Guide
Adamu Bakari Ahire, Community Guide	Saidu Mohammed, Community Guide
Mohammad U Ardo Yaji, Community Guide	Ahamdu Yugudu, Community Guide
Yahaya Inuwa, Community Guide	Abubakar Aliyu, Community Guide
Tukur Bobboi, Community Guide	Enon Ali Toms, Community Guide
Yahya Bapetel, Community Guide	Ahmadu Hamadu, Community Guide
Aminu Ibrahim, Community Guide	Gibson Elisha, Community Guide
Joda Talala, Community Guide	Abdullahi Jiji, Community Guide
Shehu Adamu Abdullahi, Community Guide	Salihu Bakari Bello, Community Guide
Daiyabu Abubakar, Community Guide	Elam Katsina, Community Guide
Aliyu Isa Ahmed, Community Guide	Jibril Baba, Community Guide
Kalangi Japheth Jatimi, Community Guide	Jethro Zidon, Community Guide
Edisson Tonnaha, Community Guide	Jauro Ahmadu, Community Guide
Ephraim Kemuel, Community Guide	Hebron Bulus, Community Guide
Aminu Ishaku Gambo, Community Guide	Solomon David Kwabe, Community Guide
Emmanuel Hyaki, Community Guide	Lydia Yohanna, Community Guide
Samson K. Nasi, Community Guide	Mathias Zira, Community Guide
Ibra Ugusta, Community Guide	Danladi Kwatri, Community Guide
Husseini Musa, Community Guide	Bada A Mallam, Community Guide
Wakili Adamu Ali, Community Guide	Mustapha Babagana, Community Guide
Saidu Adamu Barde, Community Guide	Kollo Mustapha, Community Guide
Sani Usman, Community Guide	Isiyaka Haruna, Community Guide
Umar Dahiru, Community Guide	Ibrahim Lawan Bukar, Community Guide
Mustapha Alim, Community Guide	Babagana A Buja, Community Guide
Yahaya Musa, Community Guide	Konto Ali, Community Guide
Justina Hebron, Community Guide	Sani Suleiman, Community Guide
Jacob Audi, Community Guide	Ahmed Shattima, Community Guide
Abdulraheed Ibrahim, Community Guide	Mohammed Makin, Community Guide
Monday Eli, Community Guide	Babagana Modu, Community Guide
Munbu Aggi, Community Guide	Hamza Abubakar, Community Guide
Jeriel Jedison, Community Guide	Fatima M Bulama, Community Guide
Amos Abbare, Community Guide	Mohammed Musa, Community Guide
Walle Ezra, Community Guide	Usman Wadu, Community Guide
Abubakar Jauro, Community Guide	Ndaye Samson, Community Guide

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 Ali Gana, Community Guide
 Shatima Isa, Community Guide
 Alh Kadafur Y Birma, Community Guide
 Ali Mohd Usman, Community Guide
 Ibrahim Mohammed, Community Guide
 Abdulkariam Lawan Mohd, Community Guide
 Musa Pamun, Community Guide
 Ishaku Mai Kaji, Community Guide
 Usman Ali, Community Guide
 Mai Anguwa Haruna, Community Guide
 Ezikel Samaila, Community Guide
 Danladi Inusa, Community Guide
 Bulama Musa, Community Guide
North Central Zone
 Nakoto Esther Useni, Zonal Mobilizer
 Zubairu Kudirat Bolanle, State Based Mobilizer
 Gbadeyan Olawale James, State Based Mobilizer
 Alabi Ibrahim, State Based Mobilizer
 Alabi Aminat Titilayo, Community Mobilizer
 Allasoka Lisala Elkana, Community Mobilizer
 Abdulraman Fatimoh, Community Mobilizer
 Oke Comfort, Community Mobilizer
 Suleiman Ajape, Community Mobilizer
 Woli Bilkisu Adejimi, Community Mobilizer
 Yusuf O. Rasheedat, Community Mobilizer
 Giwa Idowu Muhibat, Community Mobilizer
 Mohammed Amdalat Toyin, Community Mobilizer
 Ajiboye TaibatArinola, Community Mobilizer
 Rafiu Alhassan, Community Mobilizer
 Bashirat Hassan, Community Mobilizer
 Ishola Fatai (Laca), Community Mobilizer
 Olaitan Jimoh (Laca), Community Mobilizer

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 Owolabi Titilayo, Community Mobilizer
 Afolayan Idowu, Community Mobilizer
 Wale Raphael Ajibaye, Community Mobilizer
 Raji Modupe, Community Mobilizer
 Agbede Obafemi, Community Mobilizer
 Omotosho Felicia Funke, Community Mobilizer
 Odofin MonisolaAdijat, Community Mobilizer
 Afolabi Ajape, Community Mobilizer
 Suleiman Yoniki Ahmed, Community Mobilizer
 Saidu Lawal, Community Mobilizer
 Mohammed Mudi, Community Mobilizer
 Usman Zikki Nasir, Community Mobilizer
 Bayo Apata, Community Mobilizer
 Haruna Adamu, Community Mobilizer
 Adam Aliyu, Community Mobilizer
 Fatimoh Abubakar, Community Mobilizer
 Gana Paul, Community Mobilizer
 Yakubu Mamman, Community Mobilizer
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 Victoria Matthew, State Based Mobilizer
 Usman Aisha Hajiya, State Based Mobilizer
 HanatuWochiko, Community Mobilizer
 Ahmed Bawa Abubakar, Community Mobilizer
 Ahmad, Muhammad Adamu, Community Mobilizer
 Usman Alhaji Muhammed, Community Mobilizer

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 Tani Shagabe, Community Mobilizer
 Yaro Martha Otsahel, Community Mobilizer
 Sabina Chinchan, Community Mobilizer
 Adie Josiah Ashue, Community Mobilizer
 Idris Abdulmalik Musa, Community Mobilizer
 Ibrahim Ishaku Dodo, Community Mobilizer
 Samaila Garba, Community Mobilizer
 Shuaibu Faruna, Community Mobilizer
 Adamu A. Usman, Community Mobilizer
 Abubakar Abdul-Hamid, Community Mobilizer
 Umar Abdulkarim Y., Community Mobilizer
 Yakubu Abdulakeem, Community Mobilizer
 Hassan Wachiko, Community Mobilizer
 Synthia Faithful Kpetu, Community Mobilizer
 Markus, Grace Nemah, Community Mobilizer
 Hajara Bala, Community Mobilizer
 Waziri Yakubu Bagudu, Community Mobilizer
 Ibrahim Mohammed, Community Mobilizer
 Mohammed Ibrahim Sanusi, Community Mobilizer
 Mohammed Abdullahi Ndana, Community Mobilizer
 Abdulmalik Mustapha, Community Mobilizer
 Tsado Rachel Kaka, Community Mobilizer
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 Sule Aminu A., Community Mobilizer
 Nmadu Solomon Ndagi, Community Mobilizer
 Achebu Yusuf Kemso, State Based Mobilizer
 Hamza Aliyu, State Based Mobilizer
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 Bako Helen, Community Mobilizer
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 Ibiniaye Joseph Kehinde, Community Mobilizer
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 Bosede Toyin Micah, Community Mobilizer
 Yakubu Rekiyat, Community Mobilizer
 Ojo Emmanuel O., Community Mobilizer
 Alao O Williams, Community Mobilizer
 Abdulraheem Sefinat, Community Mobilizer
 Abdulhakim Bello Mayaki, Community Mobilizer
 Akor Sani, Community Mobilizer
 Peter Ejigbo Ibrahim, Community Mobilizer
 Shedrack Ojochegebe Mathias, Community Mobilizer
 Yakubu Mohammed, Community Mobilizer
 David Mary Lade, Community Mobilizer
 Abaniwo Nathaniel, Community Mobilizer
 Mohammed M. Ndagi, Community Mobilizer
 Onuh Sunday, Community Mobilizer
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 Mohammed Lawal, Community Mobilizer
 Shittu Jibrin, Community Mobilizer
 Adama Patience Ojone, Community Mobilizer
 Yunusa Abdullahi, Community Mobilizer

Muhammed Yusuf Awal, Community Mobilizer
 Achimugu Paul Odoma, Community Mobilizer
 Egbunu Abigail, Community Mobilizer
 Idoko Rebecca, State Based Mobilizer
 Dooshima Alpha Iorzuia, State Based Mobilizer
 Utume Josephine M, State Based Mobilizer
 Aaver Japhet Aondowase, Community Mobilizer
 Abaya Comfort Msurshima, Community Mobilizer
 Enger Terdoo Jerome, Community Mobilizer
 Achigili Florence, Community Mobilizer
 Musa Sediq Achadu, Community Mobilizer
 Agor Odeh Godwin, Community Mobilizer
 Tijani Mohammed, Community Mobilizer
 Agum Kuma Naga, Community Mobilizer
 Albert A Finbar, Community Mobilizer
 Ambe Cletus Atakpa, Community Mobilizer
 Abdullahi Bala Giwa, Community Mobilizer
 Anza Grace Teraver, Community Mobilizer
 Helen Ashaver, Community Mobilizer
 Cletus O. Honn, Community Mobilizer
 Edeh Ocheje Amos, Community Mobilizer
 Elizabeth Onuh, Community Mobilizer
 Martha Ichapi, Community Mobilizer
 Gwaza Mwuese, Community Mobilizer
 Member Rachel Hanior, Community Mobilizer
 Vincent Anza, Community Mobilizer
 Inalegwu John Freeman, Community Mobilizer
 Isah Yahaya, Community Mobilizer
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Yusuf Kyedyen, Community Guide	Dauda Abuhuraira Igashi, Community Guide
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Isma'il Tahiru Abubakar, Community Guide	Ukwuije Onyinyechi Precious, Community Guide
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Gabriel Moses Timjas, Community Guide	Isaac Monday, Community Guide
Godwin Kelvin Unabor, Community Guide	Gideon Dauda, Community Guide
Gabriel Moses Timias, Community Guide	Victor Kelechi John, Community Guide
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Napdul Salven Durven, Community Guide	Ado Ya'u, Community Mobilizer

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Biniya Aliyu, Community Mobilizer	Ruqayya Ibrahim, Community Mobilizer
Ayuba Muhammad, Community Mobilizer	Maryam Ibrahim, Community Mobilizer
Mansur Salisu, Community Mobilizer	Ibrahim Nasidi, Community Mobilizer
Faruku Isah, Community Mobilizer	Fatima Habib Sadauki, Community Mobilizer
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Farouk Musa, Community Mobilizer	Zainab Nasidi Abdullahi, Community Mobilizer
Hadiza Ibrahim, Community Mobilizer	Aliyu Yunusa Bare, Community Mobilizer
Jabir Usman Muhd, Community Mobilizer	Sani Abdu Garko, Community Mobilizer
Lawan Alasan, Community Mobilizer	Aisha Umar Abdullahi, Community Mobilizer
Haruna Abdullahi, Community Mobilizer	Jibril Abdullahi Bello, Community Mobilizer
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Abdulmalik Muhd Adamu, Community Mobilizer	Umar Haliru Muhd, Community Mobilizer
Aliyu Salisu, Community Mobilizer	Aliyu Salisu, Community Mobilizer
Salisu Idris Karshi, Community Mobilizer	Maryam Isa, Community Mobilizer
Sadiq Haruna, Community Mobilizer	Maryam Abdullahi, Community Mobilizer
Muzammil Sani Musa, Community Mobilizer	Mansur Wada, Community Mobilizer
Muhammad Danaro Yusuf, Community Mobilizer	Aliyu Yusuf Gano, Community Mobilizer
Sunusi Aliyu, Community Mobilizer	Auwalu Uba, Community Mobilizer
Abubakar Garba Ibrahim, Community Mobilizer	Shehu Abdulwahab, Community Mobilizer
Auwalu Abba Hussein, Community Mobilizer	Jibril Umar, Community Mobilizer
Salisu Ado, Community Mobilizer	Ali Shehu, Community Mobilizer
Umar Sani Yahaya, Community Mobilizer	Nafisa Muhammad, Community Mobilizer
Bala Malam, Community Mobilizer	Mika'ilu Musa Zango, Community Mobilizer
Musa Lawal Roni, Community Mobilizer	Fadimatu Muhammadu Nasidi, Community Mobilizer
Nasiru Sa'id Nasidi, State Based Mobilizer	Hussaini Muhammad Gwarzo, Community Mobilizer
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Binta Umar Abdullahi, State Based Mobilizer	Usaina Magaji, Community Mobilizer
Aliyu Musa Shehu, State Based Mobilizer	Gwaggoliya Auwalu, Community Mobilizer
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Hadiza Ghali, Community Mobilizer	Safiya Muhd Lawal, Community Mobilizer
Bello Ali Sadik, Community Mobilizer	Muhsin Sa'id Salihu, Community Mobilizer
Salisu Abdulwahab, Community Mobilizer	Ibrahim Suleiman Baba, Community Mobilizer
Shehu A Ilu, Community Mobilizer	Hajara Umar, Community Mobilizer
Fatima Nasiru, Community Mobilizer	Sulaiman Hashim Ibrahim, Community Mobilizer
Shamsiyah Tijjani, Community Mobilizer	Usman Dauda, Community Mobilizer
Abdulrahman Abdulhamid, Community Mobilizer	Idris Rabiu, Community Mobilizer
Mukhtar Sani K/Mata, Community Mobilizer	Abubakar Umar, Community Mobilizer
Nura Musa Sulaiman, Community Mobilizer	Aisha Sani Musa, Community Mobilizer
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Hafizu Aliyu, Community Mobilizer	Sulaiman Auwal, Community Mobilizer
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Hassan Muhammad Tukur, Community Mobilizer	Balarabe Muhd K/Naisa, Community Mobilizer
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Bashir Sulaiman, Community Mobilizer	Aminu Halliru Muhammad, Community Mobilizer
Khalil Ibrahim, Community Mobilizer	Sagir Umar Aliyu, Community Mobilizer
Fatima Ibrahim Muhd, Community Mobilizer	Jibril Sule Adamu, Community Mobilizer
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 Nura Bello, Community Mobilizer
 Aminu Abubakar, Community Mobilizer
 Yahaya Usman, Community Mobilizer
 Surajo Abubakar, Community Mobilizer
 Jamilu Musa, Community Mobilizer
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 Jamilu Sale, Community Mobilizer
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Obanewo Fibi Sandra, Community Mobilizer	Abdullahi Hamza, Community Guide
Linda Daura, Community Mobilizer	Musa Muhammad Zugo, Community Guide
Anthony Lord Thaddeys, Community Mobilizer	Muhd Zanki Haruna, Community Guide
Hassan Ahmed, Community Mobilizer	Musa Najabo, Community Guide
Evelyn N Rohbam, Community Mobilizer	Abubakar Muhd Maigari, Community Guide
Chinazo Anthonia Umenwobi, Community Mobilizer	Umar Muhd, Community Guide
Aminu Babangida, Community Mobilizer	Balama Amadu, Community Guide
Yashim Hilda Zwahu, Community Mobilizer	Garba Dahiru, Community Guide
Kure Imam Habila, Community Mobilizer	Aliyu Sale, Community Guide
Jibril Isa, Community Mobilizer	Madubbo Garbou, Community Guide
Mishael Yakubu, Community Mobilizer	Ya'u Maiuguwa, Community Guide
Isa Bawa, Community Mobilizer	Alhassan Umar, Community Guide
Halima Mohammed Sani, Community Mobilizer	Muktar Abdullahi, Community Guide
Bakut Joel Kaboshio, Community Mobilizer	Abdilmuddalib Abdulrashid, Community Guide
Haruna Aaron Sunday, Community Mobilizer	Bala Aliyu Maiunguwa, Community Guide
Hajara Aliyu, Community Mobilizer	Jirbrin Madaki, Community Guide
Daha Mohammad, Community Mobilizer	Adamu Abubakar Wakilin, Community Guide
Ismaila Aliyu, Community Mobilizer	Ibrahim Hudu Maiunguwa, Community Guide
Abdulamid Ahmad, Community Mobilizer	Sarki Ibrahim S. Daral, Community Guide
Hafsat Idris, Community Mobilizer	Yunusa Dalhatu Kodoma, Community Guide
Sulaiman Idris, Community Mobilizer	Adamu Da'u Sadau, Community Guide
Felicia Boman, Community Mobilizer	Hamza Maiunguwa Tokai, Community Guide
Rakiya Ado Shehu, Community Mobilizer	Abdullahi Muhd Tuje, Community Guide
Umar Garba, Community Guide	Usman Usaini, Community Guide
Muhd Auta Maiwaunguwa, Community Guide	Maiunguwa Babannan Manzo, Community Guide
Maigari Zubaru Shehu, Community Guide	Yakubu Usman, Community Guide
Abdullahi Iliyas Fago, Community Guide	Isa Alhaji Yusuf, Community Guide
Muhd Isa Dagali, Community Guide	Musa Gandu, Community Guide
Salisu Dayyabu, Community Guide	Yusuf A. Ali, Community Guide
Maiunguwa Manniru, Community Guide	Alhaji Salisu Maiunguwa, Community Guide
Maiunguwa Abdullahi Abu, Community Guide	Hamisu Yusuf, Community Guide
Sunusu Maiunguwa, Community Guide	Maiunguwa Uzairu, Community Guide
Mal. Lawal Yankwashi, Community Guide	Musbahu Abdullahi, Community Guide
Salisu Usman, Community Guide	Shukuranu Harisu, Community Guide
Zahairu Sale, Community Guide	Mainuguwa Bala Ibrahim, Community Guide
Maigari Usman, Community Guide	Hamisu Yahuza Isa, Community Guide
Maiunguwa Rabiu Kanya, Community Guide	Maiunguwa Lafiya, Community Guide
Muhd Aminu, Community Guide	Abba Gwadai, Community Guide
Maigatari Maiunguwa, Community Guide	Usaini Maruta, Community Guide
Kaya Maiunguwa, Community Guide	Abubakar Saleh, Community Guide
Bulama Muazu, Community Guide	Ahmadu Usaini, Community Guide
Bulama Hannun Giwa, Community Guide	Mallam Yusuf, Community Guide
Bulama Maitsamiya, Community Guide	Kabiru Kafinata, Community Guide
Idris Alasan, Community Guide	Abubakar Muhd, Community Guide
Bula Haru Sani, Community Guide	Sama'ilia Abdulsalam, Community Guide
Salisu Rawai, Community Guide	Ibrahim Galadima, Community Guide
Tata Inakili, Community Guide	Usman Sa'idu, Community Guide
Musa Alili, Community Guide	Abubakar Sabiu, Community Guide
Maigari Abdu, Community Guide	Surajo Kabiru, Community Guide
Kawu Sule, Community Guide	Murtala Ibrahim, Community Guide
Gambo Alhaji Saidu, Community Guide	Mansur Sule, Community Guide
Maigari Yanono, Community Guide	Bello Rabiu, Community Guide
Muhd Ibrahim, Community Guide	Sani Ahmad, Community Guide
Muhammad Abubakar, Community Guide	Mukhtar Abdullahi, Community Guide
Alh. Adam Bayero, Community Guide	Abubakar Abdu, Community Guide
Dauda Adamu, Community Guide	Kabiru Bello, Community Guide
Maigari Muhd, Community Guide	Kabiru Bala, Community Guide
Musa Suleiman, Community Guide	Malam Habu Shanono, Community Guide
Rabiu Haruna, Community Guide	Garba Galadima, Community Guide
Malam Ali, Community Guide	Majiddadi Ibrahim, Community Guide
Hussaini Muhd, Community Guide	Tukur Babba, Community Guide

Habibu Mukhtar, Community Guide	Kabiru Manya, Community Guide
Saidu Musa, Community Guide	Idris Garba, Community Guide
Rabiu Muhammad, Community Guide	Shitu Dauda, Community Guide
Saminu Aliyu, Community Guide	Musa Mansur, Community Guide
Malan Sani, Community Guide	Abubakar Rafi, Community Guide
Dahiru Hamza, Community Guide	Bala Roka, Community Guide
Dini Abubakar, Community Guide	Mohammed Dutsi, Community Guide
Haruna Uba, Community Guide	Umaru Kura, Community Guide
Shamsu Adamu, Community Guide	Muhammad Dan Bukkuyum, Community Guide
Yazid Hassan, Community Guide	Nasiru Abubakar Mazaje, Community Guide
Idris Ya'u, Community Guide	Dan Amo Magaji Nasarawa, Community Guide
Muhammad Zaharadden, Community Guide	Abubakar Shugaba, Community Guide
Usman Muhammad, Community Guide	Sabon Gari Aliyu, Community Guide
Abdulhamid, Community Guide	Adamu Abdullahi, Community Guide
Salisu Maifada, Community Guide	Abu S/Malami, Community Guide
Garzali Maifada, Community Guide	Mansur Salisu, Community Guide
Labaran Abdullahi Me Ung, Community Guide	Sabiу Salisu, Community Guide
Hamisu Aminu Indabawa, Community Guide	Murtala Abdullahi, Community Guide
Abba Lawan Daneji, Community Guide	Magaji Aliyu, Community Guide
Abbas Abdulkadir, Community Guide	Murtala Tukur, Community Guide
Abdullahi Mai Kano, Community Guide	Sani Maccido, Community Guide
Saddiku Kuka, Community Guide	Sani Galadima, Community Guide
Shehu Ilyasu, Community Guide	Ibrahim Abdullahi, Community Guide
Usaini Ibrahim, Community Guide	Sani Usman Dan Ajawo, Community Guide
Muhammad Musa, Community Guide	Abubakar Nabuba, Community Guide
Usaini Abba, Community Guide	Ashiru Ibrahim, Community Guide
Ahmad Magaji, Community Guide	Malam Umar Waziri, Community Guide
Sule Abdulkadir, Community Guide	Malam Lawali, Community Guide
Bashir Muhammad, Community Guide	Beelo Saidu Gura-Guri, Community Guide
Ahmad Hunainu, Community Guide	Maisallah Muhammad, Community Guide
Adamu Mukaddas, Community Guide	Bilyaminu Murtala, Community Guide
Sani Lawan, Community Guide	Lawali Dangaladima, Community Guide
Sama'ila Abdulsalam, Community Guide	Murtala Yellow, Community Guide
Adamu Sulaiman, Community Guide	Mamman Dandutsi, Community Guide
Sa'idu Garba, Community Guide	Jamilu Bakwai, Community Guide
Muhammad Lawal, Community Guide	Kabiru Bala, Community Guide
Ibrahim Gora, Community Guide	Yusuf Baburde, Community Guide
Musa Ibrahim, Community Guide	Aliyu Bawa, Community Guide
Haruna Sule, Community Guide	Aliyu Buhari, Community Guide
M. Unguwa Malan Garba, Community Guide	Daudu Galadima, Community Guide
Alh. Abubakar Usman, Community Guide	Sanusi Ibrahim, Community Guide
Halilu Umar, Community Guide	Audu Dogari, Community Guide
Malan Sani Tela, Community Guide	Malam Dahiru, Community Guide
Malan Abdullahi Lawan, Community Guide	Ibrahim Rafi, Community Guide
Mika Ilu Zangina Me Ung, Community Guide	Muhammadu S. Fada, Community Guide
Shehu Abdussalam, Community Guide	Mustapha Madaro, Community Guide
Ismaila Magaji, Community Guide	Abubakar Mustapha, Community Guide
Bala Danjuma, Community Guide	Ibahim Abdullahi, Community Guide
Bala Me Unguwa, Community Guide	Hamza Isa, Community Guide
Amadu Zakari, Community Guide	Abdullahi Salmanu, Community Guide
Ado Garba, Community Guide	Muhammed Bature, Community Guide
Shehu Umar, Community Guide	Samaila Aliyu, Community Guide
Datti Umar, Community Guide	Nasiru Muhammad, Community Guide
Mal Ahmadu Bala, Community Guide	Anas Magaji, Community Guide
Bala Hamza, Community Guide	Umaru Muhammad, Community Guide
Hamisu Yusheu, Community Guide	Maiunguwa Adamu, Community Guide
Shitumuhd, Community Guide	Aminu Maiunguwa, Community Guide
Adamu Ibrahim, Community Guide	Sani Marafa, Community Guide
Haruna Abdulhamid, Community Guide	Hameed Abdullahi, Community Guide
Abdullahi Abdulmalik, Community Guide	Bello Umar, Community Guide
Yakubu Abdullahi, Community Guide	Ibrahim Adamu, Community Guide

Muhammad Wike, Community Guide	Maigari Unguwar Gobir, Community Guide
Salisu Abubakar, Community Guide	Lawal Yau, Community Guide
Shafiu Umar, Community Guide	Audu Yau, Community Guide
Sarkin Dogarai, Community Guide	Babangida Lawai, Community Guide
Magajin Gari, Community Guide	Maiunguwa Lawai Salisu, Community Guide
Nura Muhammad, Community Guide	Shamsuddeen Abdullahi, Community Guide
Sufiyanu Shuaibu, Community Guide	Haruna Usman, Community Guide
Shehu Idris, Community Guide	Zakari Iliyasu, Community Guide
Sani Isah, Community Guide	Abubakar Lawal, Community Guide
Sani Ibrahim, Community Guide	Sule Maiunguwa, Community Guide
Usman Lawal Danladi, Community Guide	Maiunguwa Sani, Community Guide
Muazu Jaafar, Community Guide	Maiunguwa Salisu, Community Guide
Maiunguwa Tijjani Abdullahi, Community Guide	Sadisu Unguwar Ganye, Community Guide
Dalha Rabe, Community Guide	Ahmad Danladi, Community Guide
Zaharaddeen Abbas, Community Guide	Abdulhadi Nasiru, Community Guide
Dayyabu Idris, Community Guide	Maounguwa Aminu, Community Guide
Magaji Abdulrahman, Community Guide	Maiunguwa Halilu, Community Guide
Danmulki Sawani, Community Guide	Rabiu Saadu, Community Guide
Husaini Abubakar Tsamiya, Community Guide	Sadam Yusuf, Community Guide
Nasiru Musa, Community Guide	Nazifi Usman, Community Guide
Aminu Dageji, Community Guide	Aminu Ibrahim, Community Guide
Maiunguwa Yankuku, Community Guide	Ibrahim Sani, Community Guide
Hamisu Abdullahi (Babangida), Community Guide	Murtala Abdulrazak, Community Guide
Salisu Tukur, Community Guide	Maiunguwa Sabiu, Community Guide
Maiunguwa Bala, Community Guide	Muhammad Dayyabu, Community Guide
Tasiu Abdu, Community Guide	Maigari Sani, Community Guide
Hon. Alhasan Abdullahi, Community Guide	Musbahu Yusuf, Community Guide
Abdulrahman Mohd, Community Guide	Jamilu Fararu, Community Guide
Maryam Muhammed, Community Guide	Abu Dandare, Community Guide
Maigari Amadu, Community Guide	Jafaru Abbas, Community Guide
Musa Maigari, Community Guide	Dan Isa Hakimi, Community Guide
Maiunguwa Radi, Community Guide	Garba Manuga Dan Auta, Community Guide
Abu Damaga, Community Guide	Ibrahim Magaji, Community Guide
Hayatu Ashiru, Community Guide	Muhammadu Maiyaki, Community Guide
Maiunguwa Buhari, Community Guide	Amadu Buda Hakimi, Community Guide
Mal Umar Mustafa, Community Guide	Zayyanu Muhammad, Community Guide
Usman Badamasi, Community Guide	Nasiru Garba, Community Guide
Salisu Musa, Community Guide	Garba Mai Katuru, Community Guide
Maiunguwa Muhammad Saadu, Community Guide	Rabiu Sarkin Fada, Community Guide
Murtala Umar, Community Guide	Usman Garba, Community Guide
Maiunguwa Sadi Abdu, Community Guide	Alh Salihu, Community Guide
Abdu Mamman, Community Guide	Samaila Illo, Community Guide
Ayuba Abdullahi, Community Guide	Salihu Tudu, Community Guide
Muhammadu Sani Ibrahim, Community Guide	Abdullahi Jima, Community Guide
Kabiru Rabiu, Community Guide	Ishaka Ibrahim Gada, Community Guide
Atiku, Community Guide	Dadi Dangaladima, Community Guide
Maiunguwa Musa Kyauta, Community Guide	Salihu Aliyu Sarkin Yaki, Community Guide
Yahya Gulbi, Community Guide	Bashiru Dan Jummai, Community Guide
Alhaji Sale Mamman, Community Guide	Sani Anguwa, Community Guide
Zayyanu Ishaq, Community Guide	Mamuda Aliyu (Mudi), Community Guide
Maiunguwa Adamu, Community Guide	Muhammadu Yahaya, Community Guide
Muhammad Mustapha, Community Guide	Haruna Alhassan, Community Guide
Maiunguwa Dawa, Community Guide	Abdullahi Shawaki, Community Guide
Aminu Saidu, Community Guide	Ibrahim Yakubu, Community Guide
Sani Abba, Community Guide	Yahaya Turaku, Community Guide
Kabir Umar, Community Guide	Abdullahi Ibrahim, Community Guide
Bawa Na Wakili Maiunguwa, Community Guide	Junaidu Abdullahi, Community Guide
Alhaji Hamza Maiunguwa, Community Guide	Sukeiman Abubakar Milo, Community Guide
Bukadi Tamawa, Community Guide	Gado Hashimu, Community Guide
Mal Ibrahim Sarkin Tasha, Community Guide	Kasimu Ahmed, Community Guide
Jaridu Tsuge, Community Guide	Uwaisu Adamu, Community Guide

Garba Hakimi, Community Guide	Banbaki James, Community Guide
Umar Abdu, Community Guide	Sunday Peter, Community Guide
Abubakar Maigari Zayyara, Community Guide	Joshua Dandoka, Community Guide
Chika Wakilin Maigari, Community Guide	Caleb Danjuma, Community Guide
Gidado Maigari, Community Guide	Simon, Community Guide
Alh. Adu Gada, Community Guide	Isa Abdullahi, Community Guide
Dogari Shamaki Yar Tsakuwa, Community Guide	Caleb, Community Guide
Yusuf Abubakar Kware, Community Guide	Mai Angwa Bala Ango, Community Guide
Ismaila Muhammad, Community Guide	Ishaku Tanko, Community Guide
Sarkin Rafin Dunguji, Community Guide	Sani Yahaya, Community Guide
Halilu Mamman, Community Guide	Shehu Abdullahi, Community Guide
Bashir Alkali, Community Guide	Rayyanu, Community Guide
Mallam Kabiru Abdullahi, Community Guide	Muhammed Mugatakarda, Community Guide
Ibrahim Danzaria, Community Guide	Rabiu, Community Guide
Umaru Maishanu, Community Guide	Genesis Yakubu, Community Guide
Muktari Aliyu, Community Guide	Mr. John, Community Guide
Malami Bello Mai Karfi, Community Guide	Alh. Yahaya, Community Guide
Bello Shehu, Community Guide	Yahaya John, Community Guide
Muhammad, Community Guide	Bakariya Sagir, Community Guide
Kasimu Muhammad, Community Guide	Mai Ungwa Nura Wata, Community Guide
Yusuf S. Gandu, Community Guide	Yusuf Bawa, Community Guide
Mubarak Mubi, Community Guide	Hassan Umar, Community Guide
Muhammad Roron Hakimi, Community Guide	Baban Audi, Community Guide
Bello Isa, Community Guide	Ahmed Aliyu, Community Guide
Abdullahi Maigari, Community Guide	Usman Abdullahi, Community Guide
Dandare Taru, Community Guide	Mai Ugwa Abubakar Muhammed, Community Guide
Babangida Garba, Community Guide	Muhammed Auwal Adamu, Community Guide
Dan Yaya Barmando, Community Guide	Aliyu Bello Zuata, Community Guide
Dogo Maidawa Sankira, Community Guide	Idris Tahir, Community Guide
Umaru Mode, Community Guide	Mai Ungwa Ayuba, Community Guide
Musa Bello, Community Guide	Annas Zubairu, Community Guide
Abubakar Magani Mai Dange, Community Guide	Dalhatu Saidu Sarki, Community Guide
Yusuf Ibrahim, Community Guide	Emmanuel Ogbole, Community Guide
Umaru Muhammadu, Community Guide	Haruna Hussaini D/Wai, Community Guide
Suleiman Aliyu, Community Guide	Ungwan Idi, Community Guide
Muhamadu Rafi, Community Guide	Zulyadani Alkasim, Community Guide
Mallam Hassan, Community Guide	Elisha Lawal, Community Guide
Hamisu Aliyu, Community Guide	Mai Angwa Shehu Samaidi, Community Guide
Umaru Magaji, Community Guide	Abubakar Abbas, Community Guide
Nura Umar, Community Guide	Mai Angwan Danjume, Community Guide
Sulaiman Abubakar Dikko Dan Dauda, Community Guide	Sa'adu Garba, Community Guide
Ali Maikifi, Community Guide	Munkaila Adamu, Community Guide
Shehu Dangara, Community Guide	Aliyu Audu, Community Guide
Abubakar Sahabi, Community Guide	Abubakar Yusuf, Community Guide
Bello Maigari Tudu, Community Guide	Suleiman Abdullahi, Community Guide
Shehu Garba, Community Guide	Mukkaila Adamu (Omo), Community Guide
Nasiru Dodo, Community Guide	Jude Mayira, Community Guide
Haliru Sarki/Hali Kwardo, Community Guide	Rabiu Inwura, Community Guide
Mustapha Bunu, Community Guide	Shuaibu Tanimu, Community Guide
Magaji Bazai, Community Guide	Mallam Ibrahim Abdulkadir, Community Guide
Hamidu, Community Guide	Musa Idris Ibrahim, Community Guide
Kaka Hakimi, Community Guide	Murtala Adamu, Community Guide
Livinus Timothy, Community Guide	Ibrahim Chairman, Community Guide
Bisi, Community Guide	Saidu Abdulkarim, Community Guide
Bawa Kaduna, Community Guide	Rabui Mohammed Taju, Community Guide
Ezekiel, Community Guide	Saidu Abdulkarim, Community Guide
Pius Kazah, Community Guide	Silas Samaila, Community Guide
Jeffrey Ashu, Community Guide	Rabo Sarki, Community Guide
Nuhu Bako, Community Guide	Sarki Abdulhamid, Community Guide
Irimiya Nuhu, Community Guide	Abdul Ibada, Community Guide
Lucious Emmanuel, Community Guide	Daniel Danjuma, Community Guide

Charlse, Community Guide
 Josiah Gwara, Community Guide
 Elisha Abba, Community Guide
 John Akawu, Community Guide
 Yahuza Aliyu Kakangi, Community Guide
 Hakim Adamu, Community Guide
 Christopher Sale, Community Guide
 Lawal Umar, Community Guide
 Michael Kunama, Community Guide
 Daniel Dudu Audu, Community Guide

Laboratory Management

Alash'le Abimiku, Director of Lab Management
 Julius Manjengwa, Senior Lab Technical Advisor
 Brian Asiimwe, Senior Lab Technical Advisor
 Wessen Nega, Senior Lab Technical Advisor
 Isiramen Olajide, Lab Technical Advisor
 Moses Njoku, Lab Technical Advisor
 Augustine Onyeaghala, Lab Technical Advisor
 Aliyu Daneji, Lab Technical Advisor
 Christopher Ifeanyi Chime, Program Manager, Central Lab
 Omotsefe Tessy Aluyi, Program Officer, Lab
 Geofrey Azi Yusuf, Program Officer, Lab
 Onyema Nwalegu, Program Officer, Lab
 Nididi Agala, Senior Program Officer, Biorepository Lab
 Michael Ajigo, Lab Officer, Biorepository Lab
 Oyebanjo Akin, Lab Officer, Biorepository Lab
 Egbenoma Andrew Agboeghian, Lab Officer, Biorepository Lab
 Chinwe Offorka, Lab Officer, Biorepository Lab
 Martha Tonga, Lab Officer, Biorepository Lab
 Onokevbagbe Edewede, Lab Support HQ Staff
 Egbulefu Isaac, Lab Support HQ Staff

North Central Zone

Chidi Ihesiaba, Zonal Lab Coordinator
 Emily Meshack, Sub-zonal Coordinator

North East Zone

Musa Akusuk, Zonal Lab Coordinator
 Rita Wakili, Sub-zonal Coordinator

North West Zone

Mikhail Abubakar, Zonal Lab Coordinator
 Abubakar Y. Koki, Sub-zonal Coordinator

South East Zone

Sylvester Ojuigo, Zonal Lab Coordinator
 Immaculata Okoechya, Sub-zonal Coordinator

South South Zone

Ogboi Sonny Johnbull, Zonal Lab Coordinator
 Promise Eneze, Sub-zonal Coordinator

South West Zone

Jenrola Olarewaju Idris, Zonal Lab Coordinator
 Shafiu Gumel, Sub-zonal Coordinator

Satellite Lab Specialists

Tinja Bukar, Satellite Lab Specialist
 Babagana Mohammed Aji, Satellite Lab Specialist
 Ukwen Riyebande Riken, Satellite Lab Specialist
 David Elija, Satellite Lab Specialist
 Natty Gilber, Satellite Lab Specialist
 Lynn Maori, Satellite Lab Specialist
 Usman Sadisu, Satellite Lab Specialist
 Obed Tibi, Satellite Lab Specialist
 Muhammed Musa, Satellite Lab Specialist

Lubabaty A. Yusuf, Satellite Lab Specialist
 Ayuba Haruna Mallah, Satellite Lab Specialist
 Florence Ezekiel Pwana, Satellite Lab Specialist
 Tima Chida Male, Satellite Lab Specialist
 Christopher Rimamnyang M., Satellite Lab Specialist
 Mohammed Nuhu, Satellite Lab Specialist
 Sunday Liman Irmiya, Satellite Lab Specialist
 Fatima Alhaji Ajiya, Satellite Lab Specialist
 Zara Alkali Mustapha, Satellite Lab Specialist
 Glory Didam, Satellite Lab Specialist
 Mohammed Yahaya, Satellite Lab Specialist
 Aminu Minjibir Ibrahim, Satellite Lab Specialist
 Nasiru Tijjani Zubairu, Satellite Lab Specialist
 Mansur Aminu, Satellite Lab Specialist
 Hajia Amina Ibrahim, Satellite Lab Specialist
 Amos Tonak, Satellite Lab Specialist
 Abubakar Babangida Usman, Satellite Lab Specialist
 Ibrahim Muhammad Kamilu, Satellite Lab Specialist
 Yahaya Ayuba, Satellite Lab Specialist
 Mohammed Kabir, Satellite Lab Specialist
 Badamasi Musa, Satellite Lab Specialist
 Nasiru Magaji Sadiq, Satellite Lab Specialist
 Bala Auna Isah, Satellite Lab Specialist
 Ahmed Habibu Badawi, Satellite Lab Specialist
 Ibrahim Muhammed Hassan, Satellite Lab Specialist
 Fatima Baba Suye, Satellite Lab Specialist
 Abdulrazak Dabjuma, Satellite Lab Specialist
 Veronica Umoh, Satellite Lab Specialist
 Kufreabasi Isaac, Satellite Lab Specialist
 Idongesit Udoh, Satellite Lab Specialist
 Thomas Odey Jeremiah, Satellite Lab Specialist
 Thompson Ejuba, Satellite Lab Specialist
 Eseoghenemaro Jarikre, Satellite Lab Specialist
 Onuwa Ushiadi, Satellite Lab Specialist
 Henry Ugbor, Satellite Lab Specialist
 Ernest Igbinovia, Satellite Lab Specialist
 Valentine Ikalumhe, Satellite Lab Specialist
 Loveday Zeebdee, Satellite Lab Specialist
 Brown Princewill Emmanuel, Satellite Lab Specialist
 Andy-Nwokocha Mary, Satellite Lab Specialist
 Goodness Omu, Satellite Lab Specialist
 Kelechi Uzoma, Satellite Lab Specialist
 Lorine Daniel Ogheneke, Satellite Lab Specialist
 Chidera Florence Eke, Satellite Lab Specialist
 Elendu Kalu Eke, Satellite Lab Specialist
 Blessing Okezie, Satellite Lab Specialist
 Ikelionwu John, Satellite Lab Specialist
 Queenet Okeke, Satellite Lab Specialist
 Thomas Mbam, Satellite Lab Specialist
 Ikechukwu Ukeni, Satellite Lab Specialist
 Chima P. Chima, Satellite Lab Specialist
 Nkechi Umeh, Satellite Lab Specialist
 Ijeoma Assumpta Onyinbo, Satellite Lab Specialist
 Adaeze Ikeru, Satellite Lab Specialist
 Sabastine Chigozie Nwafor, Satellite Lab Specialist
 Victor Oma, Satellite Lab Specialist
 Joy Agu, Satellite Lab Specialist
 Ezeike Ogbu Michael, Satellite Lab Specialist
 Nri-Ezedi Chukwuebuka C., Satellite Lab Specialist
 Ejiofor Agbo, Satellite Lab Specialist
 Are Olawaremi, Satellite Lab Specialist

Egwumah Christian, Satellite Lab Specialist
 John Atizi, Satellite Lab Specialist
 Grace Adachi, Satellite Lab Specialist
 Regina Aluku, Satellite Lab Specialist
 Princess Young, Satellite Lab Specialist
 Orji Chiamaka Chisolyte, Satellite Lab Specialist
 Onyinye Joe Alago, Satellite Lab Specialist
 Stephen Anawo, Satellite Lab Specialist
 Gabriel Bolaji, Satellite Lab Specialist
 Stephen Davou, Satellite Lab Specialist
 Aniobi Frances Chinelo, Satellite Lab Specialist
 Elizabeth Duile, Satellite Lab Specialist
 Florence Roland, Satellite Lab Specialist
 Nwaiwu Chioma, Satellite Lab Specialist
 Iyke Adebi, Satellite Lab Specialist
 Izegbe Chukwunoso, Satellite Lab Specialist
 Muyiwa Olaiya, Satellite Lab Specialist
 Kelechi Uzoma Ibezim, Satellite Lab Specialist
 Yinka Akinfenwa, Satellite Lab Specialist
 Olusegun Ayinla Fasina, Satellite Lab Specialist
 Faderera Ogunoye, Satellite Lab Specialist
 Peter Olowoniyi, Satellite Lab Specialist
 Oluwaseyi Bamisaye, Satellite Lab Specialist
 Julius Ademoyegan, Satellite Lab Specialist
 Adetunji Alao, Satellite Lab Specialist
 Samuel olalere Obadire, Satellite Lab Specialist
 Afeez Rasheed, Satellite Lab Specialist
 Olarinde Olaide, Satellite Lab Specialist
 Folake Abiodun, Satellite Lab Specialist
 Oluwafemi Omokayode, Satellite Lab Specialist
 Bamidele Fatade, Satellite Lab Specialist
 Opeyemi Laluwoye, Satellite Lab Specialist
 Opeyemi Ojo, Satellite Lab Specialist
 Roseline Anerunoye, Satellite Lab Specialist
 Emmanuel Olawale Ogunmola, Satellite Lab Specialist
 Ojokuku Hammed, Satellite Lab Specialist
 Adeyeye Adetunji Tam, Satellite Lab Specialist
 Similoluwa Afolabi, Satellite Lab Specialist
 Shande Thomas, Lab Focal Person
 Ekojonwa Jibrin Alabila, Lab Focal Person
 Enokela Moses Omene, Lab Focal Person
 Ahaneku Anthony I. Osuji, Lab Focal Person
 Alao Oluwasina Ezekiel, Lab Focal Person
 Mrs. Mbah Nwando, Lab Focal Person
 Yusuf Paul Omolori, Lab Focal Person
 Iduh Jeremiah Adama, Lab Focal Person
 Baba Abraham Ajoru, Lab Focal Person
 Alamu Abimbola Rukayat, Lab Focal Person
 Ishaq Zainab Nosu, Lab Focal Person
 Loyede Bidemi Terasar, Lab Focal Person
 Etosu Ogoh Stephen, Lab Focal Person
 Kelechi Ibezim, Lab Focal Person
 Maga Ishaya Ayuba, Lab Focal Person
 Mohammed Kudu Shehu, Lab Focal Person
 Major Khanu, Lab Focal Person
 Aliyu Alhassan, Lab Focal Person
 Rindap NimzeJohn, Lab Focal Person
 Timothy Nuhu Pam, Lab Focal Person
 AjalaEse, Lab Focal Person
 Nayungi Kefas, Lab Focal Person

Chris Lawrence, Lab Focal Person
 Pwakutti Theodore, Lab Focal Person
 Denis Wayagoron, Lab Focal Person
 Yusuf Abdul, Lab Focal Person
 Abubakar Sarafa, Lab Focal Person
 Wo Kadala Reuben/Kevin Ajayi, Lab Focal Person
 Manu Abubakar Dauda, Lab Focal Person
 Dibal Arhyel Wandali, Lab Focal Person
 Luka Joseph, Lab Focal Person
 Famoriyo Lateef, Lab Focal Person
 Godwin Nwep, Lab Focal Person
 UsmanAdbdulrasheed, Lab Focal Person
 Stephen Funam, Lab Focal Person
 Modu Aji Kolo, Lab Focal Person
 Mohammed Yasidi, Lab Focal Person
 Ado Mohammed Salisu, Lab Focal Person
 Sulaiman Abdulkadir Saeed, Lab Focal Person
 Mohammed Tukur Abubakar, Lab Focal Person
 Bayei Keziah D.J., Lab Focal Person
 Sadiya H. Umar, Lab Focal Person
 Haruna Abdullahi Dauda, Lab Focal Person
 Samuel Onyekwere, Lab Focal Person
 Iro Mamman Kkr, Lab Focal Person
 Babangida Samuel, Lab Focal Person
 Kabiru Haruna Yeldu, Lab Focal Person
 Ene Martina Onyilo, Lab Focal Person
 Nura Altine, Lab Focal Person
 Sani Y. Mohammed, Lab Focal Person
 Muhammad Alto Abubakar, Lab Focal Person
 Usman Aliyu Turaki, Lab Focal Person
 Sulaiman Ahmad, Lab Focal Person
 Aminu Shehu, Lab Focal Person
 Frederick Okosun, Lab Focal Person
 Yarima Aliyu Ibrahim, Lab Focal Person
 David Chioma Blessing, Lab Focal Person
 Ulu Okechukwu, Lab Focal Person
 Onyekonwu Vivian, Lab Focal Person
 Chioma Opara, Lab Focal Person
 Elder Dr. Dan Onyia, Lab Focal Person
 Idam Frederick, Lab Focal Person
 Onwuka Kalu Chima, Lab Focal Person
 Emmanuel Ngwu, Lab Focal Person
 Ohanaka Juliana Chinyere, Lab Focal Person
 Nsonwu Cajetan Chibuike, Lab Focal Person
 Mr. Ederi Aginaye Solomon, Lab Focal Person
 Mrs. Ebasi Nneka Nwokorie, Lab Focal Person
 Mr. Amang Richard, Lab Focal Person
 Mr. Wilson Omang, Lab Focal Person
 Ogban Ibor Eni, Lab Focal Person
 Ukwamedua Henry, Lab Focal Person
 Nze Ikechukwu Francis, Lab Focal Person
 Mr. Francis Omuera, Lab Focal Person
 Mrs. Evelyn Okorie, Lab Focal Person
 John-Wuzuigwe Roseline, Lab Focal Person
 Mr. John Alwell, Lab Focal Person
 Dr. Friday Ido, Lab Focal Person
 Mrs. UmohBenedict Christiana, Lab Focal Person
 Mrs. Tolu Fafure Benson, Lab Focal Person
 Idowu Adenike Adebimpe, Lab Focal Person
 Yusuf Rafiu Adekunle, Lab Focal Person

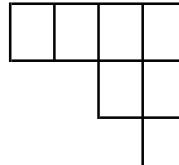
Peter Mauton, Lab Focal Person
Ibikunle Margaret Olufemi, Lab Focal Person
Mrs. Oke A.O., Lab Focal Person
Akintaju Felix, Lab Focal Person
Mrs. Adesola Alawode, Lab Focal Person
Mrs. Ogunbiyi M.A., Lab Focal Person
Mr. Ajayi Olalekan, Lab Focal Person
Mr. Esan Olubunmi E., Lab Focal Person
Mrs. Kolawole Lydia Iyabo, Lab Focal Person
Mrs. Onayade Temitope, Lab Focal Person
Mr. Niyi Raheem, Lab Focal Person
Mr. Adetona Atiba, Lab Focal Person
Major Abidoye Yetunde, Lab Focal Person

APPENDIX E

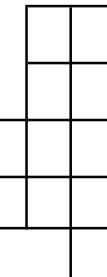
HOUSEHOLD QUESTIONNAIRE

NIGERIA AIDS INDICATOR AND IMPACT SURVEY (NAIIS)
HOUSEHOLD QUESTIONNAIRE

IDENTIFICATION (1)	
PLACE NAME	
NAME OF HOUSEHOLD HEAD	
ENUMERATION AREA
HOUSEHOLD NUMBER
PEDIATRIC HOUSEHOLD (1=YES, 2=NO)



INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY MONTH YEAR INT. NUMBER RESULT
INTERVIEWER NAME	_____	_____	_____	
RESULT*	_____	_____	_____	
NEXT VISIT: DATE	_____	_____	_____	TOTAL NUMBER OF VISITS <input type="checkbox"/>
TIME	_____	_____	_____	



*RESULT CODES:

- 1 COMPLETED
- 2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT
- 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME
- 4 POSTPONED
- 5 REFUSED
- 6 DWELLING VACANT OR ADDRESS NOT A DWELLING
- 7 DWELLING DESTROYED
- 8 DWELLING NOT FOUND
- 9 OTHER _____
(SPECIFY)

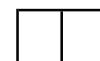
TOTAL ELIGIBLE MEN
(ADULTS AND MATURE MINORS)



TOTAL ELIGIBLE WOMEN (ADULTS AND MATURE MINORS)



TOTAL ELIGIBLE CHILDREN (6 TO 14 YEARS)

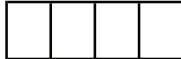


TOTAL CHILDREN (0 MONTHS TO 5 YEARS)



NAME AND ID OF SUPERVISOR

NAME _____



MODULE 0: HEAD OF HOUSEHOLD ELIGIBILITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
H1A	IS [NAME] AGED 18 YEARS OR OLDER? HOUSEHOLD HEAD MUST BE 18 YEARS OF OLDER, OR MUST BE AN EMANCIPATED MINOR AGE 15-17 YEARS.	YES 1 NO 2	→ H2
H1B	IS [NAME] AGED 15 YEARS OR OLDER?	YES 1 NO 2	INELIGIBLE → END INT.
H1C	IS [NAME] AN EMANCIPATED MINOR? AN EMANCIPATED MINOR IS 15-17 YEARS OF AGE WHO IS MARRIED, OR PREGNANT, OR A PARENT, OR HEAD OF THE HOUSEHOLD.	YES 1 NO 2	INELIGIBLE → END INT.
H2	DOES [NAME] HAVE A HEARING DISABILITY? OBSERVE IF THE PARTICIPANT HAS DIFFICULTY ENGAGING IN CONVERSATIONS.	YES 1 NO 2	→ H4
H3	CAN THE SURVEY TEAM ACCOMMODATE HEARING DISABILITY OF [NAME]?	YES 1 NO 2	INELIGIBLE → END INT.
H4	CAN SURVEY BE CONDUCTED IN A LANGUAGE [NAME] SPEAKS?	YES 1 NO 2	INELIGIBLE → END INT.
H5	DOES [NAME] HAVE A VISUAL IMPAIRMENT?	YES 1 NO 2	→ H8
H6	ASK [NAME] TO READ THE TEXT BELOW. Purpose of Survey: This survey will help us know how many people in Nigeria are at risk for getting HIV, have HIV and need health services. Your taking part will help the Federal Ministry of Health make health services better in Nigeria.		
H7	WAS [NAME] ABLE TO READ THE TEXT WITHOUT MUCH PROBLEM?	YES 1 NO 2	→ H9
H8	IS [NAME] ABLE TO IDENTIFY A WITNESS?	YES 1 NO 2	INELIGIBLE → END INT.
H9	IS [NAME] COGNITIVELY ABLE TO CONSENT? DOES THE RESPONDENT UNDERSTAND THE TEXT HE/SHE HAS READ?	YES 1 NO 2	→ H10 INELIGIBLE → END INT.
H10	PROCEED TO ASK THE INFORMED CONSENT FOR THE HOUSEHOLD SURVEY.		

LINE NO.	USUAL RESIDENTS AND VISITORS		RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE	AGE	MATURE MINOR STATUS, IF AGE IS 15- 17 YEARS			IF AGE 0-17 YEARS ORPHAN STATUS/PARENT OR GUARDIAN			IF AGE 0-14 YEARS	FOR ALL HOUSE- HOLD MEMBER	IF RESPONDENT IS MALE AND 18 YEARS OR OLDER, OR MATURE MINOR (SEE COLUMN 7)											
	1	2					3	4	5	6	7	9			10	10a	11	11a	12	12a	13	13a	14	15	16	16a
1																										

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE	AGE	MATURE MINOR STATUS IF 17 YEARS	IF AGE 0-17 YEARS							FOR ALL HOUSE- HOLD MEM- BER		# RESPONDENT IS MALE AND 18 YEARS OR OLDER, OR MATURE MINOR (SEE COLUMN 7)									
							ORPHAN STATUS/PARENT OR GUARDIAN							IF AGE 0-14 YEARS		WIVES AND CO-HABITATING PARTNERS									
1	2	3	4	5	6	7	9	10	10a	11	11a	12	12a	13	13a	14	15	16	16a	16b	16c	16d			
1	Plese give me the first names of the persons who usually live in your household or guests of the household who stayed here last night, starting with the head of the household?			Is (NAME) male or female?	Does (NAME) stay here usually?	How old is (NAME)?	Is (NAME) a mature natural mother or father?	Does (NAME)'s natural mother or father usually live in this household?	Does (NAME)'s natural father usually live in this household?	Does (NAME)'s natural mother or father usually live in this household?	Does (NAME)'s natural father usually live in this household?	Does (NAME)'s natural mother or father usually live in this household?	Does (NAME)'s natural mother or father usually live in this household?	Does (NAME)'s natural mother or father usually live in this household?	Does (NAME)'s natural mother or father usually live in this household?	Does (NAME)'s natural mother or father usually live in this household?	RECORD 95	CHECK IF Does (NAME) have a male guardian? or was he a guest last night?	RECORD LINE OF PARENT/ GUARDIAN WHO WILL FILL OUT CHILDREN MODULE FOR (NAME)	Plese give me the first names of the persons who usually live in your household or guests of the household who stayed here last night, starting with the head of the household?		Does (NAME) have any other name or alias?			
	A person who usually lives in your household is someone who regularly consumes or contributes to food and other shared household resources.																								
	SEE CODES B BELOW.																								
	AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH PERSON, ASK Q'S 2A-C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 5-16D FOR EACH PERSON.																								
	2 = MONTH			M F	Y N	Y N	1 2	Y N DK	Y N	DK	Y N	DK	Y N	DK	Y N	DK	Y N	1 2	GO TO NEXT						
11	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
16	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
17	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
18	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
19	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
20	<input type="checkbox"/>	<input type="checkbox"/>	1	2	1	2	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

CODES FOR Q.3: RELATIONSHIP TO HEAD OF HOUSEHOLD

01 = HEAD

02 = WIFE OR HUSBAND OR PARTNER

03 = SON OR DAUGHTER

04 = SON-IN-LAW OR DAUGHTER-IN-LAW

05 = GRANDCHILD

06 = PARENT

07 = PARENT-IN-LAW

08 = BROTHER OR SISTER

09 = SISTER

10 = BROTHER

11 = CO-WIFE

12 = OTHER RELATIVE

13 = ADOPTED OR FOSTER OR STEPCHOILD

14 = NOT RELATED

98 = DON'T KNOW

- 2a) Just to make sure that I have a complete listing, are there any other persons in this household or infants that we have not listed? YES ADD TO TABLE NO
- 2b) Are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who are not related to you? YES ADD TO TABLE NO
- 2c) Are there any guests or temporary visitors staying here, or anyone else who stayed here last night, who have not been listed? YES ADD TO TABLE NO

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	What is the main source of drinking water for members of your household?	PIPED WATER PIPED INTO DWELLING 11 PIPED TO YARD/PLOT 12 PUBLIC TAP/STANDPIPE 13 PIPED TO NEIGHBOR 14 TUBE WELL OR BOREHOLE 21 DUG WELL PROTECTED WELL 31 UNPROTECTED WELL 32 WATER FROM SPRING PROTECTED SPRING 41 UNPROTECTED SPRING 42 RAINWATER 51 TANKER TRUCK 61 CART WITH SMALL TANK/JERRY CAN/CARTLESS VENDOR 71 SURFACE WATER (RIVER/DAM/LAKE/POND/STREAM/CANAL/IRRIGATION CHANNEL) 81 BOTTLED WATER/DISPENSER WATER 91 SACHET (PURE) WATER 92 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	→ 101B
101A	Where is the water source located?	IN OWN DWELLING 1 IN OWN YARD/PLOT 2 ELSEWHERE 3 DON'T KNOW 8 REFUSED 9	
101B	Do you do anything to the water to make it safer to drink?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 103
102	What do you usually do to make the water safer to drink? Anything else? RECORD ALL MENTIONED	BOIL A USE WATER FILTER (CERAMIC/SAND/COMPOSITE/ETC) B SEDIMENTATION (LET IT STAND AND SETTLE) C DISINFECTION (WATERGUARD, BLEACH, CHLORINE) D STRAIN THROUGH A CLOTH E ALUM F SOLAR DISINFECTION G OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																																																										
103	What kind of toilet facility do members of your household usually use?	<p>FLUSH OR POUR FLUSH TOILET</p> <p>FLUSH TO PIPED SEWER SYSTEM 11 FLUSH TO SEPTIC TANK 12 FLUSH TO PIT LATRINE 13 FLUSH TO SOMEWHERE ELSE 14 FLUSH, DON'T KNOW WHERE 15</p> <p>PIT LATRINE</p> <p>VENTILATED IMPROVED PIT LATRINE (VIP) 21 PIT LATRINE WITH SLAB 22 PIT LATRINE WITHOUT SLAB/ OPEN PIT 23</p> <p>COMPOSTING TOILET 31 BUCKET TOILET 41 HANGING TOILET/HANGING LATRINE .. 51 NO FACILITY/BUSH/FIELD 61 OTHER _____ (SPECIFY) DON'T KNOW 98 REFUSED 99</p>																																																																																											
104	Do you share this toilet facility with other households?	<p>YES 1 NO 2</p> <p>OTHER _____ (SPECIFY) DON'T KNOW 8 REFUSED 9</p>	→ 105																																																																																										
104A	Including your own household, how many households use this toilet facility?	<p>NO. OF HOUSEHOLDS IF LESS THAN 10 <input type="text"/> <input type="text"/></p> <p>10 OR MORE HOUSEHOLDS 95 DON'T KNOW 98 REFUSED 99</p>	→ 104B																																																																																										
104B	Where is this toilet facility located?	<p>IN OWN DWELLING 1 IN OWN YARD/PLOT 2 ELSEWHERE 3</p>																																																																																											
105	Does your household have:	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th><th style="text-align: center;">Y</th><th style="text-align: center;">N</th><th style="text-align: center;">DK</th><th style="text-align: center;">R</th></tr> </thead> <tbody> <tr> <td>a) Electricity?</td><td style="text-align: center;">a) ELECTRICITY 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>b) A connection to the national grid?</td><td style="text-align: center;">b) NATIONAL GRID 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>c) A solar power or inverter?</td><td style="text-align: center;">c) SOLAR OR INVERTER 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>d) A radio?</td><td style="text-align: center;">d) RADIO 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>e) A television?</td><td style="text-align: center;">e) TELEVISION 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>f) A non-mobile telephone?</td><td style="text-align: center;">f) NON-MOBILE PHONE 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>g) A computer?</td><td style="text-align: center;">g) COMPUTER 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>h) A refrigerator?</td><td style="text-align: center;">h) REFRIGERATOR 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>i) A table?</td><td style="text-align: center;">i) TABLE 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>j) A chair?</td><td style="text-align: center;">j) CHAIR 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>k) A bed?</td><td style="text-align: center;">k) BED 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>l) A sofa?</td><td style="text-align: center;">l) SOFA 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>m) A cupboard?</td><td style="text-align: center;">m) CUPBOARD 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>n) An air conditioner?</td><td style="text-align: center;">n) AIR CONDITIONER 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>o) An electric iron?</td><td style="text-align: center;">o) ELECTRIC IRON 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>p) A generator?</td><td style="text-align: center;">p) GENERATOR 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> <tr> <td>q) A fan?</td><td style="text-align: center;">q) FAN 1</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td><td style="text-align: center;">9</td></tr> </tbody> </table>		Y	N	DK	R	a) Electricity?	a) ELECTRICITY 1	2	8	9	b) A connection to the national grid?	b) NATIONAL GRID 1	2	8	9	c) A solar power or inverter?	c) SOLAR OR INVERTER 1	2	8	9	d) A radio?	d) RADIO 1	2	8	9	e) A television?	e) TELEVISION 1	2	8	9	f) A non-mobile telephone?	f) NON-MOBILE PHONE 1	2	8	9	g) A computer?	g) COMPUTER 1	2	8	9	h) A refrigerator?	h) REFRIGERATOR 1	2	8	9	i) A table?	i) TABLE 1	2	8	9	j) A chair?	j) CHAIR 1	2	8	9	k) A bed?	k) BED 1	2	8	9	l) A sofa?	l) SOFA 1	2	8	9	m) A cupboard?	m) CUPBOARD 1	2	8	9	n) An air conditioner?	n) AIR CONDITIONER 1	2	8	9	o) An electric iron?	o) ELECTRIC IRON 1	2	8	9	p) A generator?	p) GENERATOR 1	2	8	9	q) A fan?	q) FAN 1	2	8	9	
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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
106	What type of fuel does your household mainly use for cooking?	ELECTRICITY 01 LIQUID PROPANE GAS 02 NATURAL GAS 03 BIOGAS 04 PARAFFIN/KEROSENE 05 COAL, LIGNITE 06 CHARCOAL FROM WOOD 07 FIREWOOD 08 STRAW/SHRUBS/GRASS 09 ANIMAL DUNG 10 NO FOOD COOKED IN THE HOUSEHOLD 95 OTHER _____ (SPECIFY) DON'T KNOW 98 REFUSED 99	
FOR QUESTIONS 107-109, OBSERVE, DO NOT ASK.			
107	MAIN MATERIAL OF THE FLOOR. RECORD OBSERVATION.	NATURAL FLOOR EARTH/SAND 11 DUNG 12 RUDIMENTARY FLOOR WOOD PLANKS 21 BAMBOO SLATS 22 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL OR ASPHALT STRIPS 32 CERAMIC TILES 33 CEMENT 34 CARPET/RUG 35 TERAZZO 36 OTHER _____ (SPECIFY)	
108	MAIN MATERIAL OF THE ROOF. RECORD OBSERVATION.	NO ROOF 11 NATURAL ROOFING THATCH/PALM LEAF(CIYAWA) 12 MUD 13 RUDIMENTARY ROOFING WOOD PLANKS 21 CARDBOARD 22 FINISHED ROOFING METAL/ZINC 32 WOOD 33 CALAMINE/CEMENT FIBER 34 CERAMIC TILES 35 CEMENT/CONCRETE 36 ROOFING SHINGLES 37 OTHER _____ (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP										
109	MAIN MATERIAL OF THE EXTERIOR WALLS. RECORD OBSERVATION.	<p>NO WALLS 11</p> <p>NATURAL WALLS</p> <p>DIRT 12</p> <p>CANE/PALM/TREE TRUNKS 13</p> <p>BAMBOO WITH MUD 14</p> <p>STONE WITH MUD 15</p> <p>MUD 16</p> <p>RUDIMENTARY WALLS</p> <p>CARDBOARD 21</p> <p>REUSED WOOD 22</p> <p>PLYWOOD 23</p> <p>UNBAKED BRICKS 24</p> <p>CARTON 25</p> <p>FINISHED WALLS</p> <p>WOOD PLANKS/SHINGLES 31</p> <p>UNBAKED BRICKS COVERED 32</p> <p>WITH PLASTER 33</p> <p>BRICKS 34</p> <p>CEMENT BLOCKS 35</p> <p>CEMENT 36</p> <p>STONE WITH LIME/CEMENT 37</p> <p>OTHER 96 (SPECIFY)</p>											
110	How many rooms in this household are used for sleeping?	<p>ROOMS <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p> <p>REFUSED 99</p>											
111	Is the cooking usually done in the house, in a separate building, or outdoors?	<p>IN THE HOUSE 1</p> <p>IN A SEPARATE BUILDING 2</p> <p>OUTDOORS 3</p> <p>OTHER 6 (SPECIFY)</p>	→ 113										
112	Do you have a separate room which is used as a kitchen?	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9</p>											
113	Does any member of this household own: a) A watch? b) A mobile phone? c) A bicycle? d) A motorcycle or motor scooter? e) An animal-drawn cart? f) A car or truck? g) A boat with a motor? h) A canoe? i) A Keke Napep?	<table style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 10px;"></td> </tr> <tr> <td>Y</td> <td>N</td> <td>DK</td> <td>R</td> <td></td> </tr> </table> <p>a) WATCH 1 2 8 9</p> <p>b) MOBILE PHONE 1 2 8 9</p> <p>c) BICYCLE 1 2 8 9</p> <p>d) M-CYCLE/SCOOTER 1 2 8 9</p> <p>e) ANIMAL-DRAWN CART 1 2 8 9</p> <p>f) CAR/TRUCK 1 2 8 9</p> <p>g) BOAT WITH MOTOR 1 2 8 9</p> <p>h) CANOE 1 2 8 9</p> <p>i) KEKE - NAPEP 1 2 8 9</p>						Y	N	DK	R		
Y	N	DK	R										
114	Does any member of this household have a bank account?	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9</p>											
115	Does this household own any livestock, herds, other farm animals, camels, or poultry?	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9</p>	→ 117										

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
116	<p>How many of the following animals does this household own? IF NONE, RECORD '00'. IF 95 OR MORE, RECORD '95'. IF UNKNOWN, RECORD '98'.</p> <p>a) Milk cows or bulls? b) Other cattle? c) Horses, donkeys, or mules? d) Goats? e) Sheep? f) Chicken or other poultry such as ducks? g) Pigs? h) Camels? i) Dogs? j) Other? SPECIFY: _____</p>	<p>a) COWS/BULLS <input type="checkbox"/> <input type="checkbox"/></p> <p>b) OTHER CATTLE <input type="checkbox"/> <input type="checkbox"/></p> <p>c) HORSES/DONKEYS/MULES <input type="checkbox"/> <input type="checkbox"/></p> <p>d) GOATS <input type="checkbox"/> <input type="checkbox"/></p> <p>e) SHEEP <input type="checkbox"/> <input type="checkbox"/></p> <p>f) CHICKENS/POULTRY <input type="checkbox"/> <input type="checkbox"/></p> <p>g) PIGS <input type="checkbox"/> <input type="checkbox"/></p> <p>h) CAMELS <input type="checkbox"/> <input type="checkbox"/></p> <p>i) DOGS <input type="checkbox"/> <input type="checkbox"/></p> <p>j) OTHER <input type="checkbox"/> <input type="checkbox"/></p>	
117	Does any member of this household own any agricultural land?	<p>YES 1 NO 2 DON'T KNOW 8 REFUSED 9</p>	119
118	How many plot/acres/hectares of agricultural land do members of this household own?	<p>PLOT 1 <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/></p> <p>ACRES 2 <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/></p> <p>HECTARES 3 <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/></p> <p>95 OR MORE UNITS 9995 DON'T KNOW 9998 REFUSED 9999</p>	
119	Does your household have any mosquito nets that can be used while sleeping?	<p>YES 1 NO 2 DON'T KNOW 8 REFUSED 9</p>	END MODULE
120	How many mosquito nets does your household have? ASK TO OBSERVE ALL NETS. COUNT AND RECORD NUMBER.	<p>NUMBER OF NETS <input type="checkbox"/></p> <p>IF MORE THAN 7, RECORD 7.</p>	

APPENDIX F ADULT QUESTIONNAIRE

MODULE 0: ADULT RESPONDENT ELIGIBILITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
M1A	IS [NAME] AGED 18 YEARS OR OLDER? ADULT RESPONDENT MUST BE 18 YEARS OF OLDER, OR MUST BE AN EMANCIPATED MINOR AGE 15-17 YEARS.	YES 1 NO 2	→ M2
M1B	IS [NAME] AGED 15 YEARS OR OLDER?	YES 1 NO 2	INELIGIBLE → END INT.
M1C	IS [NAME] AN EMANCIPATED MINOR? AN EMANCIPATED MINOR IS 15-17 YEARS OF AGE WHO IS MARRIED, OR PREGNANT, OR A PARENT, OR HEAD OF THE HOUSEHOLD.	YES 1 NO 2	→ PARENT ELIGIBILITY /CONSENT.
M2	DOES [NAME] HAVE A HEARING DISABILITY? OBSERVE IF THE PARTICIPANT HAS DIFFICULTY ENGAGING IN CONVERSATIONS.	YES 1 NO 2	→ M4
M3	CAN THE SURVEY TEAM ACCOMMODATE HEARING DISABILITY OF [NAME]?	YES 1 NO 2	INELIGIBLE → END INT.
M4	CAN SURVEY BE CONDUCTED IN A LANGUAGE [NAME] SPEAKS?	YES 1 NO 2	INELIGIBLE → END INT.
M5	DOES [NAME] HAVE A VISUAL IMPAIRMENT?	YES 1 NO 2	→ M8
M6	ASK [NAME] TO READ THE TEXT BELOW. Purpose of Survey: This survey will help us know how many people in Nigeria are at risk for getting HIV, have HIV and need health services. Your taking part will help the Federal Ministry of Health make health services better in Nigeria.		
M7	WAS [NAME] ABLE TO READ THE TEXT WITHOUT MUCH PROBLEM?	YES 1 NO 2	→ M9
M8	IS [NAME] ABLE TO IDENTIFY A WITNESS?	YES 1 NO 2	INELIGIBLE → END INT.
M9	IS [NAME] COGNITIVELY ABLE TO CONSENT? DOES THE RESPONDENT UNDERSTAND THE TEXT HE/SHE HAS READ?	YES 1 NO 2	INELIGIBLE → END INT.
M10	PROCEED TO ASK THE INFORMED CONSENT FOR THE ADULT QUESTIONNAIRE.		

MODULE 1: RESPONDENT CONSENT AND BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
100A	ENTER LINE NUMBER OF THE RESPONDENT FROM THE HOUSEHOLD SCHEDULE:	<input type="text"/> <input type="text"/>	
100B	ENTER NAME OF RESPONDENT: (RESPONDENT'S NAME)		
C1	OBTAIN CONSENT. DOES [NAME] AGREE TO PARTICIPATE IN THE SURVEY?	YES 1 NO 2	→ END INTERVIEW
L1	ENTER LANGUAGE OF THE QUESTIONNAIRE	ENGLISH 1 HAUSA 2 YORUBA 3 IGBO 4	
L2	ENTER LANGUAGE OF THE INTERVIEW	ENGLISH 1 HAUSA 2 YORUBA 3 IGBO 4 OTHER _____ 6 (SPECIFY)	
L3	ENTER NATIVE LANGUAGE OF THE RESPONDENT	ENGLISH 1 HAUSA 2 YORUBA 3 IGBO 4 OTHER _____ 6 (SPECIFY)	
L4	WAS A TRANSLATOR USED?	YES 1 NO 2	
100	Thank you for agreeing to participate in this survey. Now, I would like to ask you some general questions about yourself, your education, and work.		
101	CHECK: IS RESPONDENT MALE OR FEMALE?	MALE 1 FEMALE 2	
102	How old were you on your last birthday?	AGE IN COMPLETED YEARS . <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	
103	What is your religion?	ISLAM 1 CHRISTIANITY 2 TRADITIONAL 3 NO RELIGION 4 OTHER _____ 6 (SPECIFY) DON'T KNOW 8 REFUSED 9	
104	Have you ever attended school?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 108
105	Are you currently enrolled in school?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
106	What is the highest level of school you have attended? Is it primary, secondary or higher?	PRIMARY 01 JUNIOR SECONDARY 02 SECONDARY 03 A-LEVEL 04 UNIVERSITY OR ABOVE 05 TECHNICAL OR VOCATIONAL 06 ADULT LITERACY ONLY (NO FORMAL EDUCATION) 07 KORANIC/RELIGIOUS ONLY (NO FORMAL EDUCATION) 08 DON'T KNOW 98 REFUSED 99	
107	What is the highest [CLASS/YEAR] you completed at that level?	NONE 00 YEARS <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	
108	Have you done any work in the last 12 months for which you received cash or goods as payment?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
109	Have you done any work in the last seven days for which you received cash or goods as payment?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

MODULE 2: MARRIAGE

200 Now I would like to ask you about your current and previous relationships and/or marriages.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
201	Have you ever been married or lived together with a [man/woman] as if married?	YES 01 NO 02 DON'T KNOW 98 REFUSED 99	→ END MODULE
202	How old were you the first time you married or started living with a [man/woman] as if married?	YEARS <input type="text"/> <input type="text"/> AGE AT MARRIAGE OR FIRST TIME LIVED TOGETHER 95 DON'T KNOW 98 REFUSED 99	
203	What is your marital status now? Are you married, living together with someone as if married, widowed, divorced, or separated?	MARRIED 1 LIVING TOGETHER 2 WIDOWED 3 DIVORCED 4 SEPARATED 5 DON'T KNOW 8 REFUSED 9	→ END MODULE
203A	CHECK: IS RESPONDENT MALE OR FEMALE?	MALE 1 FEMALE 2	→ 212
204	Altogether, how many wives or live-in partners do you have?	NUMBER <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	→ END MODULE
205	CHECK 16a-16d: IF NO WIVES/PARTNERS RECORDED, SKIP TO 208. The household information shows that you have [NUMBER] household members as your wives or partners. VERIFY AND READ THE NAMES OF WIVES AND PARTNERS LISTED IN THE HOUSEHOLD SCHEDULE.		
205a	CHECK 16a-16d. RECORD NAMES OF WIVES AND PARTNERS FROM HOUSEHOLD.	(NAME) _____ (NAME) _____ (NAME) _____ (NAME) _____	
206	Is [NAME] your wife or partner?	YES 1 NO 2	YES 1 NO 2
207	Does [NAME] live in the household?	YES 1 NO 2	YES 1 NO 2
207a	DOES THE RESPONDENT HAVE ANOTHER WIFE OR PARTNER?	YES 1 GO TO NEXT WIFE/PARTNER (205a) NO 2 208 ←	YES 1 GO TO NEXT WIFE/PARTNER (205a) NO 2 208 ←

NO.	QUESTIONS AND FILTERS		CODING CATEGORIES		SKIP
208	Do you have additional spouse(s) or partner(s) that live with you?		YES 1 NO 2		→ 211
209	How many additional spouse(s) or partners(s) live with you?		NUMBER	<input type="text"/> <input type="text"/>	
210	ENTER THE NAME OF [RESPONDENT'S] SPOUSE OR PARTNER THAT LIVE IN HOUSEHOLD.	(NAME)	(NAME)	(NAME)	(NAME)
	DON'T KNOW .. 8 REFUSED 9	DON'T KNOW .. 8 REFUSED 9	DON'T KNOW .. 8 REFUSED 9	DON'T KNOW .. 8 REFUSED 9	
211	How many other wives or live-in partners do you have who live elsewhere?		NUMBER OF ADDITIONAL SPOUSES OR PARTNERS	<input type="text"/> <input type="text"/>	→ END MODULE
	DON'T KNOW	98			
	REFUSED	99			
211A	CHECK: IS RESPONDENT MALE OR FEMALE?		MALE 1 FEMALE 2		→ END MODULE
212	Is your husband or partner living with you now or is he staying elsewhere?		LIVING TOGETHER 1 STAYING ELSEWHERE 2 DON'T KNOW 8 REFUSED 9		→ 216
212A	CHECK Q.212: IS THE RESPONDENT STAYING ELSEWHERE (CODED '2') AND THERE IS NO PARTNER LISTED IN THE HOUSEHOLD ROSTER				→ 216
213	The household information shows that [NAME OF HUSBAND OR PARTNER] as your [husband or partner] who lives with you in this household. Is that correct?		YES 1 NO 2 DON'T KNOW 8 REFUSED 9		→ 216
					→ 216
214	FROM THE HOUSEHOLD SCHEDULE SELECT THE SPOUSE OR PARTNER THAT LIVES WITH THE RESPONDENT		(NAME OF SPOUSE OR PARTNER)		→ 216
			NOT LISTED IN THE HOUSEHOLD 00		
215	Please tell me the name of your spouse/partner that lives with you?		(NAME OF SPOUSE OR PARTNER)		
			DON'T KNOW 8 REFUSED 9		
216	Does your husband or partner have other wives or does he live with other women as if married?		YES 1 NO 2 DON'T KNOW 8 REFUSED 9		→ END MODULE
217	Including yourself, in total, how many wives or live-in partners does your husband or partner have?		NUMBER OF WIVES OR LIVE-IN PARTNERS	<input type="text"/> <input type="text"/>	
			DON'T KNOW 98 REFUSED 99		

MODULE 3: REPRODUCTION

300 Now I would like to ask you some questions about pregnancies and children.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP		
300A	CHECK: IS RESPONDENT MALE OR FEMALE?	MALE 1 FEMALE 2	→ 335A		
301	How many times have you been pregnant including a current pregnancy?	NUMBER OF TIMES <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td></tr></table> NEVER 00 DON'T KNOW 98 REFUSED 99			→ 335A → 334
302	Have you ever had a pregnancy that resulted in a live birth? A live birth is when the baby shows signs of life, such as breathing, beating of the heart or movement.	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 334		
303	How many live births have you had since the 1st of January 2015? ENTER '00' IF NONE.	NONE 00 NUMBER OF CHILDREN <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 15px; height: 15px;"></td><td style="border: 1px solid black; width: 15px; height: 15px;"></td></tr></table> DON'T KNOW 98 REFUSED 99			→ 334
303a	Now I would like to ask you some questions about the last pregnancy that resulted in a live birth since the 1st of January, 2015.				
304	Did your last pregnancy result in birth to twins or more?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 306		
305	What is the name of the [INSERT ORDER OF BIRTH] born child from your last pregnancy that resulted in a live birth? A live birth is when the baby shows signs of life, such as breathing, beating of the heart or movement. IF THE CHILD WAS NOT NAMED BEFORE DEATH, ENTER 'BIRTH 1'.	(NAME) 	(NAME) 		
305a	DID THE RESPONDENT HAVE ANOTHER CHILD BORN FROM THE LAST PREGNANCY?	YES 1 GO TO THE ← NEXT CHILD NO 2 306 ←	YES 1 GO TO THE ← NEXT CHILD NO 2 306 ←	YES 1 GO TO THE ← NEXT CHILD NO 2 306 ←	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
306	<p>What is the name of the child from your last pregnancy that resulted in a live birth?</p> <p>A live birth is when the baby shows signs of life, such as breathing, beating of the heart or movement.</p> <p>IF THE CHILD WAS NOT NAMED BEFORE DEATH, ENTER 'BIRTH 1'.</p>	(NAME OF CHILD)	
307	When you were pregnant with [NAME], did you visit a health facility for antenatal care?	<p>YES 1 → 308A</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9 → 318</p>	
308	What is the main reason you did not visit a clinic for antenatal care when you were pregnant with [NAME]?	<p>CLINIC WAS TOO FAR AWAY 01</p> <p>COULD NOT TAKE TIME OFF WORK/TOO BUSY 02</p> <p>COULD NOT AFFORD TO PAY FOR THE VISIT 03</p> <p>DID NOT TRUST THE CLINIC STAFF 04</p> <p>RECEIVED CARE AT HOME 05</p> <p>DID NOT WANT AN HIV TEST DONE 06</p> <p>HUSBAND/FAMILY WOULD NOT LET ME GO 07 → 318</p> <p>USED TRADITIONAL BIRTH ATTENDANT/HEALER 08</p> <p>COST OF TRANSPORT 09</p> <p>RELIGIOUS REASONS 10</p> <p>OTHER 96 (SPECIFY)</p> <p>DON'T KNOW 98</p> <p>REFUSED 99</p>	
308a	Now, I will ask you some questions about HIV testing. Please remember that your responses will be kept confidential and will not be shared with anyone else.		
309	Were you ever tested for HIV before your pregnancy with [NAME]?	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9 → 312</p>	
310	Did you test positive for HIV before your pregnancy with [NAME]?	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9 → 312</p>	
311	At the time of your first antenatal care visit when you were pregnant with [NAME], were you taking ARVs, that is, antiretroviral medications to treat HIV?	<p>YES 1 → 318</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9 → 316</p>	
312	During any of your visits to the antenatal care clinic when you were pregnant with [NAME], were you <u>offered</u> an HIV test?	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9</p>	
313	Were you <u>tested</u> for HIV during any of your antenatal care clinic visits when you were pregnant with [NAME]?	<p>YES 1 → 315</p> <p>NO 2</p> <p>DON'T KNOW 8</p> <p>REFUSED 9 → 318</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
314	What is the main reason you were not tested for HIV during antenatal care with [NAME]?	DID NOT WANT AN HIV TEST DONE/DID NOT WANT TO KNOW MY STATUS . 1 DID NOT RECEIVE PERMISSION FROM SPOUSE/FAMILY 2 AFRAID OTHERS WOULD KNOW ABOUT TEST RESULT! 3 DID NOT NEED TEST/LOW RISK 4 OTHER _____ (SPECIFY) 6 DON'T KNOW 8 REFUSED 9	→ 318
315	What was the result of your last HIV test during your pregnancy with [NAME]?	POSITIVE 1 NEGATIVE 2 UNKNOWN/INDETERMINATE 3 DID NOT RECEIVE RESULTS 4 DON'T KNOW 8 REFUSED 9	→ 318
316	Did you take ARVs during your pregnancy with [NAME] to stop [NAME] from getting HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 318
317	What was the main reason you did not take ARVs while you were pregnant with [NAME]?	NOT PRESCRIBED 01 FELT HEALTHY/NOT SICK 02 COST OF MEDICATIONS 03 COST OF TRANSPORT 04 RELIGIOUS REASONS 05 TAKING TRADITIONAL MEDICATIONS .. 06 DID NOT WANT PEOPLE TO KNOW HIV STATUS 07 DID NOT RECEIVE PERMISSION FROM SPOUSE/FAMILY 08 OTHER _____ (SPECIFY) 96 DON'T KNOW 98 REFUSED 99	
318	Where did you give birth to [NAME]?	AT HOME 1 AT A HEALTH FACILITY 2 IN TRANSIT 3 OTHER _____ (SPECIFY) 6 DON'T KNOW 8 REFUSED 9	→ 325
319	Were you offered an HIV test during labor (at time of delivery)?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
320a	CHECK 310: WAS RESPONDENT HIV POSITIVE BEFORE PREGNANCY WITH [NAME]?	YES 1 NO 2	→ 322								
320b	CHECK 315: DID RESPONDENT GET A POSITIVE TEST RESULT DURING PREGNANCY WITH [NAME]?	YES 1 NO 2	→ 322								
320	Were you tested for HIV during labor?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 325								
321	What was the result of the HIV test?	POSITIVE 1 NEGATIVE 2 UNKNOWN/INDETERMINANT 3 DID NOT RECEIVE RESULTS 4 DON'T KNOW 8 REFUSED 9	→ 325								
322a	CHECK 311: WAS RESPONDENT ON ARVS AT TIME OF FIRST ANTEPARTUM CARE VISIT WHEN PREGNANT WITH [NAME]?	YES 1 NO 2	→ 325								
322b	CHECK 316: DID RESPONDENT TAKE ARVS DURING PREGNANCY WITH [NAME]?	YES 1 NO 2	→ 325								
322	During labor, were you offered ARVs to protect [NAME] against HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9									
323	During labor, did you take ARVs to protect [NAME] against HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 325								
324	Did you continue to take the ARVs after delivery?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9									
325	When did you give birth to [NAME]? IF THE RESPONDENT DOES NOT KNOW, PROBE USING LOCAL EVENT CALENDAR	DAY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> DON'T KNOW DAY 98 REFUSED 99 MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> DON'T KNOW MONTH 98 REFUSED 99 YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> DON'T KNOW YEAR 9998 REFUSED 9999									

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP	
326	Is [NAME] still alive? ENTER '00' IF CHILD WAS LESS THAN ONE YEAR OLD.	YES 1 (SKIP TO 329) ← NO 2 DON'T KNOW... 8 REFUSED 9 (SKIP TO 329) ←	YES 1 (SKIP TO 329) ← NO 2 DON'T KNOW... 8 REFUSED 9 (SKIP TO 329) ←	YES 1 (SKIP TO 329) ← NO 2 DON'T KNOW... 8 REFUSED 9 (SKIP TO 329) ←
327	How old was [NAME] in years when he/she died? ENTER '00' IF CHILD WAS LESS THAN ONE YEAR OLD.	LESS THAN 1 YR 00 AGE IN YEARS <input type="text"/> <input type="text"/> DON'T KNOW ... 98 REFUSED ... 99 (SKIP TO 331) ←	LESS THAN 1 YR 00 AGE IN YEARS <input type="text"/> <input type="text"/> DON'T KNOW ... 98 REFUSED ... 99 (SKIP TO 331) ←	LESS THAN 1 YR 00 AGE IN YEARS <input type="text"/> <input type="text"/> DON'T KNOW ... 98 REFUSED ... 99 (SKIP TO 331) ←
328	How old was [NAME] in months when he/she died? ENTER '00' IF CHILD WAS LESS THAN ONE MONTH OLD.	LESS THAN 1 MO. 00 AGE IN MONTHS <input type="text"/> <input type="text"/> DON'T KNOW ... 98 REFUSED ... 99 (SKIP TO 331) ←	LESS THAN 1 MO. 00 AGE IN MONTHS <input type="text"/> <input type="text"/> DON'T KNOW ... 98 REFUSED ... 99 (SKIP TO 331) ←	LESS THAN 1 MO... 00 AGE IN MONTHS <input type="text"/> <input type="text"/> DON'T KNOW ... 98 REFUSED ... 99 (SKIP TO 331) ←
329	Is [NAME] living with you?	YES 1 NO 2 DON'T KNOW... 8 REFUSED 9	YES 1 NO 2 DON'T KNOW... 8 REFUSED 9	YES 1 NO 2 DON'T KNOW... 8 REFUSED 9
330	ENTER THE LINE NUMBER AND NAME OF CHILD FROM THE HOUSEHOLD SCHEDULE NOT LISTED IN HOUSEHOLD 96	(NAME) LINE NO... <input type="text"/> <input type="text"/> NOT LISTED IN HOUSEHOLD 96	(NAME) LINE NO... <input type="text"/> <input type="text"/> NOT LISTED IN HOUSEHOLD 96	(NAME) LINE NO... <input type="text"/> <input type="text"/> NOT LISTED IN HOUSEHOLD 96
331	Did you ever breastfeed [NAME]?	YES 1 NO, NEVER BREASTFED .. 2 NO, CHILD NOT ALIVE ... 3 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 334) ←	YES 1 NO, NEVER BREASTFED .. 2 NO, CHILD NOT ALIVE ... 3 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 334) ←	YES 1 NO, NEVER BREASTFED 2 NO, CHILD NOT ALIVE ... 3 DON'T KNOW ... 8 REFUSED 9 (SKIP TO 334) ←
332	For how long did you breastfeed [NAME]? RECORD ANSWER ONLY IN WEEKS OR IN MONTHS. CODE '00' IF LESS THAN 1 WEEK.	WEEKS.... 1 <input type="text"/> <input type="text"/> MONTHS... 2 <input type="text"/> <input type="text"/> STILL BREASTFEEDING 996 DON'T KNOW.....998 REFUSED.....999	WEEKS.... 1 <input type="text"/> <input type="text"/> MONTHS... 2 <input type="text"/> <input type="text"/> STILL BREASTFEEDING 996 DON'T KNOW.....998 REFUSED.....999	WEEKS.... 1 <input type="text"/> <input type="text"/> MONTHS... 2 <input type="text"/> <input type="text"/> STILL BREASTFEEDING 996 DON'T KNOW.....998 REFUSED.....999
333	Thank you for the information regarding [NAME]. CHECK 305: DID THE LAST BIRTH HAVE MORE THAN ONE CHILD (I.E., TWINS, TRIPLETS)?	YES 1 (SKIP TO NEXT 326) ← NO 2	YES 1 (SKIP TO NEXT 326) ← NO 2	YES 1 (SKIP TO NEXT 326) ← NO 2

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
334a	Now, I will ask about your current pregnancies.		
334	Are you pregnant now?	YES 1 NO 2 DON'T KNOW/UNSURE 8 REFUSED 9	→ END MODULE
335a	Now, I will ask you some questions about methods that are used to avoid getting pregnant.		
335	Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
336	Which method are you or your partner using? SELECT ALL THAT APPLY.	FEMALE STERILIZATION A MALE STERILIZATION B PILL C IUD/COIL D INJECTIONS E IMPLANT F CONDOM G FEMALE CONDOM H RHYTHM/NATURAL METHODS I WITHDRAWAL J NOT HAVING SEX K OTHER _____ (SPECIFY) X DONT KNOW Y REFUSED Z	

FOOTNOTE:

For Q.305, Q.326 to Q.333 - additional form(s) is/are required for multiple births.

MODULE 4: CHILDREN

- 400 THE HOUSEHOLD SCHEDULE NOTED THAT [NAME OF PARTICIPANT] WILL FILL OUT THE CHILDREN'S MODULE FOR [NUMBER OF CHILDREN].

I am going to ask you a number of questions about your child/children regarding their health and where they get their health services.
We will ask you about these children:

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3						
401A	ENTER THE NAME AND LINE NUMBER OF [CHILD]. Now, I am going to ask you about [CHILD NAME].	(NAME) LINE NO. <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table>			(NAME) LINE NO. <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table>			(NAME) LINE NO. <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table>		
401	How old was [CHILD] in years at his/her last birthday? ENTER '00' IF CHILD IS LESS THAN ONE YEAR OLD.	LESS THAN 1 YR... 00 AGE IN YEARS <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW 98 REFUSED 99 (SKIP TO 403) ←			LESS THAN 1 YR... 00 AGE IN YEARS <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW 98 REFUSED 99 (SKIP TO 403) ←			LESS THAN 1 YR... 00 AGE IN YEARS <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW 98 REFUSED 99 (SKIP TO 403) ←		
402	How old is [CHILD] in months? ENTER '00' IF CHILD IS LESS THAN ONE MONTH OLD.	AGE IN MONTHS <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW ... 98 REFUSED 99			AGE IN MONTHS <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW ... 98 REFUSED 99			AGE IN MONTHS <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW ... 98 REFUSED 99		
403	Is [CHILD] a boy or girl?	BOY 1 GIRL 2 DON'T KNOW .. 8 REFUSED 9	BOY 1 GIRL 2 DON'T KNOW .. 8 REFUSED 9	BOY 1 GIRL 2 DON'T KNOW .. 8 REFUSED 9						
404	Is [CHILD] enrolled in school?	YES 1 NO, NOT CURRENTLY IN SCHOOL .. 2 NO, TOO YOUNG TO BE IN SCHOOL 3 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 408a) ←	YES 1 NO, NOT CURRENTLY IN SCHOOL .. 2 NO, TOO YOUNG TO BE IN SCHOOL 3 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 408a) ←	YES 1 NO, NOT CURRENTLY IN SCHOOL .. 2 NO, TOO YOUNG TO BE IN SCHOOL 3 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 408a) ←						
405	What is the highest level of school [CHILD] has attended: nursery, primary or secondary?	NURSERY 1 PRIMARY 2 JR. SECONDARY 3 SR. SECONDARY 4 DON'T KNOW .. 98 REFUSED 99 (SKIP TO 408a) ←	NURSERY 1 PRIMARY 2 JR. SECONDARY 3 SR. SECONDARY 4 DON'T KNOW .. 98 REFUSED 99 (SKIP TO 408a) ←	NURSERY 1 PRIMARY 2 JR. SECONDARY 3 SR. SECONDARY 4 DON'T KNOW .. 98 REFUSED 99 (SKIP TO 408a) ←						
406	What grade/form/year is [CHILD] in now?	GRADE/FORM /YEAR ... <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW ... 98 REFUSED 99 (SKIP TO 408a) ←		GRADE/FORM /YEAR ... <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW ... 98 REFUSED 99 (SKIP TO 408a) ←		GRADE/FORM /YEAR ... <table style="display: inline-table; vertical-align: middle;"><tr><td style="border: 1px solid black; width: 1em; height: 1em;"></td></tr></table> DON'T KNOW ... 98 REFUSED 99 (SKIP TO 408a) ←				

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
407	Was [CHILD] enrolled in school during the previous school year?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 408a) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 408a) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 408a) ←
407a	What level of school was [CHILD] attending during the previous school year: nursery, primary or secondary?	NURSERY 1 PRIMARY 2 JR. SECONDARY 3 SR. SECONDARY 4 DON'T KNOW .. 98 REFUSED 99 (SKIP TO 408a) ←	NURSERY 1 PRIMARY 2 JR. SECONDARY 3 SR. SECONDARY 4 DON'T KNOW .. 98 REFUSED 99 (SKIP TO 408a) ←	NURSERY 1 PRIMARY 2 JR. SECONDARY 3 SR. SECONDARY 4 DON'T KNOW .. 98 REFUSED 99 (SKIP TO 408a) ←
408	What grade/form/year was [CHILD] enrolled in during the previous school year?	GRADE/FORM /YEAR ... <input type="text"/> DON'T KNOW .. 98 REFUSED 99	GRADE/FORM /YEAR ... <input type="text"/> DON'T KNOW .. 98 REFUSED 99	GRADE/FORM /YEAR ... <input type="text"/> DON'T KNOW .. 98 REFUSED 99
408A	CHECK: IS [CHILD] A GIRL?	YES 1 (SKIP TO 411) ← NO 2	YES 1 (SKIP TO 411) ← NO 2	YES 1 (SKIP TO 411) ← NO 2
409	Is [CHILD] circumcised? Circumcision is the complete removal of the foreskin from the penis.	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 411) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 411) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 411) ←
410	Who circumcised [CHILD]?	DOCTOR/NURSE/ CLINICAL OFFICER 1 TRADITIONAL PRACTITIONER/ CIRCUMCIZER 2 MIDWIFE 3 OTHER _____ 6 (SPECIFY) DON'T KNOW .. 8 REFUSED 9	DOCTOR/NURSE/ CLINICAL OFFICER 1 TRADITIONAL PRACTITIONER/ CIRCUMCIZER 2 MIDWIFE 3 OTHER _____ 6 (SPECIFY) DON'T KNOW .. 8 REFUSED 9	DOCTOR/NURSE/ CLINICAL OFFICER 1 TRADITIONAL PRACTITIONER/ CIRCUMCIZER 2 MIDWIFE 3 OTHER _____ 6 (SPECIFY) DON'T KNOW .. 8 REFUSED 9

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
411	Has [CHILD] ever been tested for HIV?	YES 1 (SKIP TO 413) ← NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 430) ←	YES 1 (SKIP TO 413) ← NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 430) ←	YES 1 (SKIP TO 413) ← NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 430) ←
412	Why has [CHILD] never been tested for HIV? SELECT ALL THAT APPLY.	DON'T KNOW WHERE TO TEST A TEST COSTS TOO MUCH .. B TRANSPORT COSTS TOO MUCH C TOO FAR AWAY D AFRAID OTHERS WILL KNOW ABOUT TEST RESULTS E DON'T NEED TEST/ LOW RISK F DID NOT RECEIVE PERMISSION FROM SPOUSE/ FAMILY G AFRAID SPOUSE/ PARTNER/ FAMILY WILL KNOW RESULTS H DON'T WANT TO KNOW CHILD HAS HIV I CANNOT GET TREATMENT FOR HIV J TEST KITS NOT AVAILABLE .. K RELIGIOUS REASONS .. L OTHER _____ X (SPECIFY) DON'T KNOW .. Y REFUSED Z (SKIP TO 430) ←	DON'T KNOW WHERE TO TEST A TEST COSTS TOO MUCH .. B TRANSPORT COSTS TOO MUCH C TOO FAR AWAY D AFRAID OTHERS WILL KNOW ABOUT TEST RESULTS E DON'T NEED TEST/ LOW RISK F DID NOT RECEIVE PERMISSION FROM SPOUSE/ FAMILY G AFRAID SPOUSE/ PARTNER/ FAMILY WILL KNOW RESULTS H DON'T WANT TO KNOW CHILD HAS HIV I CANNOT GET TREATMENT FOR HIV J TEST KITS NOT AVAILABLE .. K RELIGIOUS REASONS .. L OTHER _____ X (SPECIFY) DON'T KNOW .. Y REFUSED Z (SKIP TO 430) ←	DON'T KNOW WHERE TO TEST A TEST COSTS TOO MUCH .. B TRANSPORT COSTS TOO MUCH C TOO FAR AWAY D AFRAID OTHERS WILL KNOW ABOUT TEST RESULTS E DON'T NEED TEST/ LOW RISK F DID NOT RECEIVE PERMISSION FROM SPOUSE/ FAMILY G AFRAID SPOUSE/ PARTNER/ FAMILY WILL KNOW RESULTS H DON'T WANT TO KNOW CHILD HAS HIV I CANNOT GET TREATMENT FOR HIV J TEST KITS NOT AVAILABLE .. K RELIGIOUS REASONS .. L OTHER _____ X (SPECIFY) DON'T KNOW .. Y REFUSED Z (SKIP TO 430) ←
413	What month and year was [CHILD]'s last HIV test done?	MONTH <input type="text"/> <input type="text"/> DON'T KNOW .. 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED 9999	MONTH <input type="text"/> <input type="text"/> DON'T KNOW .. 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED 9999	MONTH <input type="text"/> <input type="text"/> DON'T KNOW .. 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED 9999
414	What was [CHILD]'s last HIV test result?	POSITIVE 1 NEGATIVE 2 UNKNOWN/ INDETERMINATE .. 3 DID NOT RECEIVE RESULTS 4 DON'T KNOW .. 8 REFUSED 9 (SKIP to 430) ←	POSITIVE 1 NEGATIVE 2 UNKNOWN/ INDETERMINATE .. 3 DID NOT RECEIVE RESULTS 4 DON'T KNOW .. 8 REFUSED 9 (SKIP to 430) ←	POSITIVE 1 NEGATIVE 2 UNKNOWN/ INDETERMINATE .. 3 DID NOT RECEIVE RESULTS 4 DON'T KNOW .. 8 REFUSED 9 (SKIP to 430) ←

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
415	<p>What was the month and year of [CHILD]’s first HIV positive test result? Please give your best guess.</p> <p>This will be the very first HIV positive test result that you have received.</p> <p>PROBE TO VERIFY DATE.</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON’T KNOW ... 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 9998 REFUSED 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON’T KNOW ... 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 9998 REFUSED 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON’T KNOW ... 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 9998 REFUSED 9999</p>
416	Has [CHILD] ever received HIV medical care from a doctor, clinical officer, nurse or any health worker?	<p>YES 1 <input type="checkbox"/> (SKIP TO 418) ←</p> <p>NO 2 DON’T KNOW ... 8 REFUSED 9 <input type="checkbox"/> (SKIP TO 421) ←</p>	<p>YES 1 <input type="checkbox"/> (SKIP TO 418) ←</p> <p>NO 2 DON’T KNOW ... 8 REFUSED 9 <input type="checkbox"/> (SKIP TO 421) ←</p>	<p>YES 1 <input type="checkbox"/> (SKIP TO 418) ←</p> <p>NO 2 DON’T KNOW ... 8 REFUSED 9 <input type="checkbox"/> (SKIP TO 421) ←</p>
417	What is the main reason why [CHILD] has never seen a doctor, clinical officer, or nurse for HIV medical care? READ RESPONSES ALOUD	<p>FACILITY TOO FAR AWAY ... 01 DON’T KNOW WHERE TO GET HIV MED. CARE FOR CHILD 02 COST OF CARE 03 COST OF TRANSPORT 04 DON’T THINK CHILD NEEDS IT/CHILD IS NOT SICK 05 FEAR THAT OTHERS WILL KNOW CHILD HAS HIV IF I TAKE HIM/HER TO CLINIC 06 RELIGIOUS REASONS .. 07 CHILD IS TAKING TRAD. MED. 08 OTHER <u>96</u> (SPECIFY) DON’T KNOW 98 REFUSED 99 (SKIP TO 421) ←</p>	<p>FACILITY TOO FAR AWAY ... 01 DON’T KNOW WHERE TO GET HIV MED. CARE FOR CHILD 02 COST OF CARE 03 COST OF TRANSPORT 04 DON’T THINK CHILD NEEDS IT/CHILD IS NOT SICK 05 FEAR THAT OTHERS WILL KNOW CHILD HAS HIV IF I TAKE HIM/HER TO CLINIC 06 RELIGIOUS REASONS .. 07 CHILD IS TAKING TRAD. MED. 08 OTHER <u>96</u> (SPECIFY) DON’T KNOW 98 REFUSED 99 (SKIP TO 421) ←</p>	<p>FACILITY TOO FAR AWAY ... 01 DON’T KNOW WHERE TO GET HIV MED. CARE FOR CHILD 02 COST OF CARE 03 COST OF TRANSPORT 04 DON’T THINK CHILD NEEDS IT/CHILD IS NOT SICK 05 FEAR THAT OTHERS WILL KNOW CHILD HAS HIV IF I TAKE HIM/HER TO CLINIC 06 RELIGIOUS REASONS .. 07 CHILD IS TAKING TRAD. MED. 08 OTHER <u>96</u> (SPECIFY) DON’T KNOW 98 REFUSED 99 (SKIP TO 421) ←</p>
418	What month and year did [CHILD] <u>first</u> see a doctor, clinical officer or nurse for HIV medical care? PROBE TO VERIFY DATE.	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 9998 REFUSED ... 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 9998 REFUSED ... 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON’T KNOW 9998 REFUSED ... 9999</p>

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
419	What month and year did [CHILD] last see a doctor, clinical officer or nurse for HIV medical care?	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99 (SKIP TO 421) ←</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED ... 9999 (SKIP TO 421) ←</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99 (SKIP TO 421) ←</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED ... 9999 (SKIP TO 421) ←</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99 (SKIP TO 421) ←</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED ... 9999 (SKIP TO 421) ←</p>
419A	CHECK 419: WAS LAST VISIT LESS THAN 7 MONTHS AGO?	<p>YES 1 (SKIP TO 421) ←</p> <p>NO 2</p>	<p>YES 1 (SKIP TO 421) ←</p> <p>NO 2</p>	<p>YES 1 (SKIP TO 421) ←</p> <p>NO 2</p>
420	<p>What is the main reason for [CHILD] not seeing a doctor, clinical officer or nurse for HIV medical care for more than 6 months?</p> <p>READ RESPONSES ALOUD</p>	<p>FACILITY TOO FAR AWAY .. 01 DON'T KNOW WHERE TO GET HIV MED. CARE FOR CHILD 02 COST OF CARE 03 COST OF TRANSPORT 04 DON'T THINK CHILD NEEDS IT/CHILD IS NOT SICK 05 FEAR THAT OTHERS WILL KNOW CHILD HAS HIV IF I TAKE HIM/HER TO CLINIC 06 RELIGIOUS REASONS .. 07 CHILD IS TAKING TRAD. MED. 08 NO APPT. SCHEDULED/ DID NOT MISS MOST RECENT APPT. 09 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99</p>	<p>FACILITY TOO FAR AWAY .. 01 DON'T KNOW WHERE TO GET HIV MED. CARE FOR CHILD 02 COST OF CARE 03 COST OF TRANSPORT 04 DON'T THINK CHILD NEEDS IT/CHILD IS NOT SICK 05 FEAR THAT OTHERS WILL KNOW CHILD HAS HIV IF I TAKE HIM/HER TO CLINIC 06 RELIGIOUS REASONS .. 07 CHILD IS TAKING TRAD. MED. 08 NO APPT. SCHEDULED/ DID NOT MISS MOST RECENT APPT. 09 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99</p>	<p>FACILITY TOO FAR AWAY .. 01 DON'T KNOW WHERE TO GET HIV MED. CARE FOR CHILD 02 COST OF CARE 03 COST OF TRANSPORT 04 DON'T THINK CHILD NEEDS IT/CHILD IS NOT SICK 05 FEAR THAT OTHERS WILL KNOW CHILD HAS HIV IF I TAKE HIM/HER TO CLINIC 06 RELIGIOUS REASONS .. 07 CHILD IS TAKING TRAD. MED. 08 NO APPT. SCHEDULED/ DID NOT MISS MOST RECENT APPT. 09 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99</p>
421	<p>Has [CHILD] ever had a CD4 count test?</p> <p>The CD4 count tells you how sick you are with HIV and if you need to take ARVs or other HIV medications.</p>	<p>YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 423) ←</p>	<p>YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 423) ←</p>	<p>YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 423) ←</p>

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
422	What month and year was [CHILD] last tested for his/her CD4 count?	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 9998 REFUSED ... 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 9998 REFUSED ... 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 9998 REFUSED ... 9999</p>
423	Has [CHILD] ever taken ARVs, that is, antiretroviral medications to treat his/her HIV infection?	<p>YES 1 (SKIP TO 425) ←</p> <p>NO 2</p> <p>DON'T KNOW .. 8</p> <p>REFUSED 9 (SKIP TO 429) ←</p>	<p>YES 1 (SKIP TO 425) ←</p> <p>NO 2</p> <p>DON'T KNOW .. 8</p> <p>REFUSED 9 (SKIP TO 429) ←</p>	<p>YES 1 (SKIP TO 425) ←</p> <p>NO 2</p> <p>DON'T KNOW .. 8</p> <p>REFUSED 9 (SKIP TO 429) ←</p>
424	What is the main reason [CHILD] has never taken ARVs?	<p>CHILD NOT ELIGIBLE 01</p> <p>PROVIDER DIDN'T PRESCRIBE .. 02</p> <p>HIV MED. NOT AVAILABLE .. 03</p> <p>DO NOT THINK HE/SHE NEEDS IT/NOT SICK .. 04</p> <p>COST OF MED. .. 05</p> <p>COST OF TRANSPORT 06</p> <p>RELIGIOUS REASONS .. 07</p> <p>CHILD TAKING TRAD. MED. .. 08</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW 98 REFUSED 99 (SKIP TO 429) ←</p>	<p>CHILD NOT ELIGIBLE 01</p> <p>PROVIDER DIDN'T PRESCRIBE .. 02</p> <p>HIV MED. NOT AVAILABLE .. 03</p> <p>DO NOT THINK HE/SHE NEEDS IT/NOT SICK .. 04</p> <p>COST OF MED. .. 05</p> <p>COST OF TRANSPORT 06</p> <p>RELIGIOUS REASONS .. 07</p> <p>CHILD TAKING TRAD. MED. .. 08</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW 98 REFUSED 99 (SKIP TO 429) ←</p>	<p>CHILD NOT ELIGIBLE 01</p> <p>PROVIDER DIDN'T PRESCRIBE .. 02</p> <p>HIV MED. NOT AVAILABLE .. 03</p> <p>DO NOT THINK HE/SHE NEEDS IT/NOT SICK .. 04</p> <p>COST OF MED. .. 05</p> <p>COST OF TRANSPORT 06</p> <p>RELIGIOUS REASONS .. 07</p> <p>CHILD TAKING TRAD. MED. .. 08</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW 98 REFUSED 99 (SKIP TO 429) ←</p>
425	What month and year did [CHILD] first start taking ARVs? PROBE TO VERIFY DATE.	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 9998 REFUSED ... 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 9998 REFUSED ... 9999</p>	<p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98 REFUSED 99</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 9998 REFUSED ... 9999</p>

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
426	Is [CHILD] currently taking ARVs, that is, antiretroviral medications? By currently, I mean that [CHILD] may have missed some doses but [CHILD] is still taking ARVs.	YES 1 (SKIP TO 428) ← NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 429) ←	YES 1 (SKIP TO 428) ← NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 429) ←	YES 1 (SKIP TO 428) ← NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 429) ←
427	Can you tell me the main reason why [CHILD] is not currently taking ARVs? -----	HAVE TROUBLE GIVING CHILD TABLET EVERYDAY .. 01 CHILD HAS SIDE EFFECTS/ RASH 02 FACILITY/PHARM. TOO FAR TO GET MED. REG 03 COST OF MED. .. 04 COST OF TRANSPORT 05 CHILD IS HEALTH/NOT SICK 06 FACILITY/PHARM. OUT OF STOCK 07 RELIGIOUS REASONS .. 08 CHILD TAKING TRAD. MED. .. 09 OTHER _____ 96 (SPECIFY) DON'T KNOW .. 98 REFUSED 99 (SKIP TO 429) ←	HAVE TROUBLE GIVING CHILD TABLET EVERYDAY .. 01 CHILD HAS SIDE EFFECTS/ RASH 02 FACILITY/PHARM. TOO FAR TO GET MED. REG 03 COST OF MED. .. 04 COST OF TRANSPORT 05 CHILD IS HEALTH/NOT SICK 06 FACILITY/PHARM. OUT OF STOCK 07 RELIGIOUS REASONS .. 08 CHILD TAKING TRAD. MED. .. 09 OTHER _____ 96 (SPECIFY) DON'T KNOW .. 98 REFUSED 99 (SKIP TO 429) ←	HAVE TROUBLE GIVING CHILD TABLET EVERYDAY .. 01 CHILD HAS SIDE EFFECTS/ RASH 02 FACILITY/PHARM. TOO FAR TO GET MED. REG 03 COST OF MED. .. 04 COST OF TRANSPORT 05 CHILD IS HEALTH/NOT SICK 06 FACILITY/PHARM. OUT OF STOCK 07 RELIGIOUS REASONS .. 08 CHILD TAKING TRAD. MED. .. 09 OTHER _____ 96 (SPECIFY) DON'T KNOW .. 98 REFUSED 99 (SKIP TO 429) ←
428	People sometimes forget to take all their ARVs every day. In the last 30 days, how many days has [CHILD] missed taking any ARV pills? CODE '00' IF NONE.	DAYS MISSED <input type="text"/> <input type="text"/> DON'T KNOW .. 98 REFUSED 99	DAYS MISSED <input type="text"/> <input type="text"/> DON'T KNOW .. 98 REFUSED 99	DAYS MISSED <input type="text"/> <input type="text"/> DON'T KNOW .. 98 REFUSED 99
429	Is [CHILD] currently taking Septrin or Cotrimoxazole for his/her HIV treatment? Septrin or Cotrimoxazole is a medicine recommended for people with HIV, even if they have not started treatment for HIV. It helps prevent certain infections but it is not treatment for HIV. By currently, I mean that [CHILD] may have missed some doses but is still taking Septrin or Cotrimoxazole.	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9

NO.	QUESTIONS	CHILD 1	CHILD 2	CHILD 3
430	Has [CHILD] ever visited a clinic for tuberculosis for TB diagnosis or treatment?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←
431	Have you ever been told by a doctor, clinical officer, nurse or health worker that [CHILD] had TB?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←
432	Was [CHILD] ever treated for TB?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←
433	Is [CHILD] currently on treatment for TB?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 435) ←
434	The last time [CHILD] was treated for TB, did [CHILD] complete at least 6 months of treatment?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9
435	Thank you for the information about [CHILD]. DOES THE RESPONDENT HAVE ANOTHER CHILD AGED 0-14 YEARS?	YES 1 GO TO THE NEXT CHILD ← NO 2 (END MODULE) ←	YES 1 GO TO THE NEXT CHILD ← NO 2 (END MODULE) ←	YES 1 GO TO THE NEXT CHILD ← NO 2 (END MODULE) ←

MODULE 5: MALE CIRCUMCISION

- 500 I will be asking a few questions about circumcision. Circumcision is the complete removal of the foreskin from the penis.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
500A	CHECK: IS RESPONDENT MALE OR FEMALE?	MALE 1 FEMALE 2	END → MODULE
501	Some men are uncomfortable talking about circumcision but it is important for us to have this information. Some men are circumcised. Are you circumcised?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 503 → 503 END → MODULE
502	Are you planning to get circumcised?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	END → MODULE
503	How old were you when you were circumcised? Please give your best guess. IF LESS THAN ONE YEAR, CODE '00'	LESS THAN ONE YEAR 00 AGE IN YEARS <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	
504	Who did the circumcision?	DOCTOR, CLINICAL OFFICER, NURSE 1 TRADITIONAL PRACTITIONER/ CIRCUMCISER 2 MIDWIFE 3 OTHER _____ 6 (SPECIFY) DON'T KNOW 8 REFUSED 9	

MODULE 6: SEXUAL ACTIVITY

600 In this part of the interview, I will be asking questions about your sexual relationships and practices. These questions will help us have a better understanding of how they may affect your life and risk for HIV.

Let me assure you again that your answers are completely confidential and will not be shared with anyone. If there are questions that you do not want to answer, we can go to the next question.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP			
601	<p>Have you ever had vaginal sex before?</p> <p>Vaginal sex is when a penis enters a vagina.</p>	<p>YES 1 NO 2 DON'T KNOW 8 REFUSED 9</p>	END MODULE			
602	How old were you when you had vaginal sex for the very first time?	<p>AGE IN YEARS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table></p> <p>DON'T KNOW 98 REFUSED 99</p>				
603	<p>People often have sex with different people over their lifetime. In total, with how many different people have you had sex in the last 12 months?</p> <p>IF NONE, ENTER '000'.</p> <p>IF NUMBER OF PARTNERS IS GREATER THAN 100, ENTER '100'.</p>	<p>NO PARTNERS IN LAST 12 MONTHS 000</p> <p>NUMBER OF SEXUAL PARTNERS IN LAST 12 MONTHS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 25px;"></td><td style="width: 25px;"></td><td style="width: 25px;"></td></tr></table></p> <p>DON'T KNOW 998 REFUSED 999</p>				END MODULE
604a	<p>Now I would like to ask you some questions about the people you have had sex with in the last 12 months. Let me assure you again that your answers are completely confidential and will not be told to anyone. I will first ask you about the most recent person you had sex with.</p> <p>ASK ONLY ABOUT THE LAST 3 PERSONS THE RESPONDENT HAS HAD SEX WITH.</p>					
		<p>LAST SEXUAL PARTNER</p> <p>SECOND-TO-LAST SEXUAL PARTNER</p> <p>THIRD-TO-LAST SEXUAL PARTNER</p>				
604	Does the person you had sex with live in this household?	<p>YES 1 NO 2 (SKIP TO 606) </p>	<p>YES 1 NO 2 (SKIP TO 606) </p>			
605	<p>Please identify the person you had sex with.</p> <p>SELECT THE NAME FROM THE HOUSEHOLD SCHEDULE.</p>	<p>_____ (NAME)</p> <p>IF LISTED IN THE HOUSEHOLD ... (SKIP TO 607) </p> <p>NOT LISTED IN THE HOUSEHOLD ... 96</p>	<p>_____ (NAME)</p> <p>IF LISTED IN THE HOUSEHOLD ... (SKIP TO 607) </p> <p>NOT LISTED IN THE HOUSEHOLD ... 96</p>			

		LAST SEXUAL PARTNER	SECOND-TO-LAST SEXUAL PARTNER	THIRD-TO-LAST SEXUAL PARTNER
606	I would like to ask you for the initials of this person so I can keep track. They do not have to be the actual initials of this person.	[INITIALS]	[INITIALS]	[INITIALS]
607	What is your relationship with [INITIALS]?	HUSBAND/ WIFE 01 LIVE-IN PARTNER02 PARTNER, NOT LIVING WITH RESPONDENT. 03 EX-SPOUSE/ EX-PARTNER .. 04 FRIEND / ACQUAINTANCI05 SEX WORKER ..06 SEX WORKER CLIENT 07 STRANGER ... 08 OTHER ____96 (SPECIFY) DON'T KNOW .. 98 REFUSED 99	HUSBAND/ WIFE 01 LIVE-IN PARTNER02 PARTNER, NOT LIVING WITH RESPONDENT. 03 EX-SPOUSE/ EX-PARTNER .. 04 FRIEND / ACQUAINTANCI05 SEX WORKER ..06 SEX WORKER CLIENT 07 STRANGER ... 08 OTHER ____96 (SPECIFY) DON'T KNOW .. 98 REFUSED 99	HUSBAND/ WIFE 01 LIVE-IN PARTNER02 PARTNER, NOT LIVING WITH RESPONDENT. 03 EX-SPOUSE/ EX-PARTNER .. 04 FRIEND / ACQUAINTANCI05 SEX WORKER ..06 SEX WORKER CLIENT 07 STRANGER ... 08 OTHER ____96 (SPECIFY) DON'T KNOW .. 98 REFUSED 99
608	Is [INITIALS] male or female?	MALE 1 FEMALE 2 DON'T KNOW .. 8 REFUSED 9	MALE 1 FEMALE 2 DON'T KNOW .. 8 REFUSED 9	MALE 1 FEMALE 2 DON'T KNOW ... 8 REFUSED 9
609	How old is [INITIALS]? Please give your best guess.	AGE IN YEARS DON'T KNOW... 98 REFUSED 99	AGE IN YEARS DON'T KNOW... 98 REFUSED 99	AGE IN YEARS DON'T KNOW ... 98 REFUSED 99
610	The last time you had sex with [INITIALS] was a condom used?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW ... 8 REFUSED 9
611a	CHECK 607: WAS [INITIALS] A SEX WORKER OR SEX WORKER CLIENT?	YES 1 NO 2 (SKIP TO 613) ←	YES 1 NO 2 (SKIP TO 613) ←	YES 1 NO 2 (SKIP TO 613) ←
611	Did you enter into a sexual relationship with [INITIALS] because [INITIALS] provided you with or you expected that [INITIALS] would provide you gifts, help you to pay for things, or help you in other ways?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 613) ←	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9 (SKIP TO 613) ←	YES 1 NO 2 DON'T KNOW ... 8 REFUSED 9 (SKIP TO 613) ←
612a	CHECK 607: WAS [INITIALS] THE RESPONDENT'S SPOUSE OR LIVE-IN PARTNER?	YES 1 NO 2 (SKIP TO 613) ←	YES 1 NO 2 (SKIP TO 613) ←	YES 1 NO 2 (SKIP TO 613) ←

		LAST SEXUAL PARTNER	SECOND-TO-LAST SEXUAL PARTNER	THIRD-TO-LAST SEXUAL PARTNER
612	<p>In the last 12 months, what have you received from (INITIALS)?</p> <p>Did you receive... Money? Food? School fees? Employment? Gifts or favors? Transport? Shelter or rent? Protection?</p> <p>SELECT ALL THAT APPLY.</p>	<p>DID NOT RECEIVE ANYTHING ... A MONEY B FOOD C SCHOOL FEES .. D EMPLOYMENT .. E GIFTS/FAVORS F TRANSPORT ... G SHELTER/RENT.. H PROTECTION... I OTHER _____ X (SPECIFY)</p> <p>DON'T KNOW .. Y REFUSED Z</p>	<p>DID NOT RECEIVE ANYTHING ... A MONEY B FOOD C SCHOOL FEES .. D EMPLOYMENT .. E GIFTS/FAVORS F TRANSPORT ... G SHELTER/RENT.. H PROTECTION... I OTHER _____ X (SPECIFY)</p> <p>DON'T KNOW .. Y REFUSED Z</p>	<p>DID NOT RECEIVE ANYTHING ... A MONEY B FOOD C SCHOOL FEES .. D EMPLOYMENT .. E GIFTS/FAVORS F TRANSPORT ... G SHELTER/RENT.. H PROTECTION... I OTHER _____ X (SPECIFY)</p> <p>DON'T KNOW .. Y REFUSED Z</p>
613	Do you expect to have sex with (INITIALS) again?	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9
614	Does (INITIALS) know your HIV status? HIV status could mean you are HIV negative or HIV positive.	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9	YES 1 NO 2 DON'T KNOW .. 8 REFUSED 9
615	What is the HIV status of (INITIALS)? READ THE RESPONSES ALOUD.	<p>I THINK [INITIALS] IS POSITIVE .. 1 [INITIALS] TOLD ME HE/SHE IS POSITIVE .. 2 [INITIALS] IS POSITIVE, TESTED TOGETHER .. 3 I THINK [INITIALS] IS NEGATIVE .. 4 [INITIALS] TOLD ME HE/SHE IS NEGATIVE ... 5 [INITIALS] IS NEGATIVE, TESTED TOGETHER .. 6 DON'T KNOW STATUS 8 REFUSED 9</p>	<p>I THINK [INITIALS] IS POSITIVE .. 1 [INITIALS] TOLD ME HE/SHE IS POSITIVE .. 2 [INITIALS] IS POSITIVE, TESTED TOGETHER .. 3 I THINK [INITIALS] IS NEGATIVE .. 4 [INITIALS] TOLD ME HE/SHE IS NEGATIVE ... 5 [INITIALS] IS NEGATIVE, TESTED TOGETHER .. 6 DON'T KNOW STATUS 8 REFUSED 9</p>	<p>I THINK [INITIALS] IS POSITIVE .. 1 [INITIALS] TOLD ME HE/SHE IS POSITIVE .. 2 [INITIALS] IS POSITIVE, TESTED TOGETHER .. 3 I THINK [INITIALS] IS NEGATIVE .. 4 [INITIALS] TOLD ME HE/SHE IS NEGATIVE ... 5 [INITIALS] IS NEGATIVE, TESTED TOGETHER .. 6 DON'T KNOW STATUS 8 REFUSED 9</p>
616	<p>CHECK 603: HAS RESPONDENT HAD ANOTHER PARTNER IN THE LAST 12 MONTHS?</p> <p>I will now ask you about the person you have had sex with prior to (INITIALS).</p>	<p>YES 1 (GO BACK TO 604 IN NEXT COLUMN)</p> <p>NO 2 (END MODULE) ←</p>	<p>YES 1 (GO BACK TO 604 IN NEXT COLUMN)</p> <p>NO 2 (END MODULE) ←</p>	

MODULE 7: HIV TESTING

700 Now I would like to ask you some questions about HIV testing.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	Have you <u>ever</u> been tested for HIV?	YES 1 NO 2 DONT KNOW 8 REFUSED 9	→ 703 → 901
702	Why have you never been tested for HIV? SELECT ALL THAT APPLY.	DONT KNOW WHERE TO TEST A TEST COSTS TOO MUCH B TRANSPORT COSTS TOO MUCH C TOO FAR AWAY D AFRAID OTHERS WILL KNOW ABOUT TEST RESULTS E DONT NEED TEST/LOW RISK F DID NOT RECEIVE PERMISSION FROM SPOUSE/FAMILY G AFRAID SPOUSE/PARTNER/ FAMILY WILL KNOW RESULTS H DONT WANT TO KNOW I HAVE HIV ... I CANNOT GET TREATMENT FOR HIV... J TEST KITS NOT AVAILABLE K RELIGIOUS REASONS L OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	→ 901
703	What month and year was your last HIV test?	MONTH <input type="text"/> <input type="text"/> DONT KNOW 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DONT KNOW 9998 REFUSED 9999	
704	Where was the last test done?	VCT FACILITY 01 MOBILE VCT 02 AT HOME 03 HEALTH CLINIC / FACILITY 04 HOSPITAL OUTPATIENT CLINIC 05 TB CLINIC 06 STI CLINIC 07 HOSPITAL INPATIENT WARDS 08 BLOOD DONATING CENTER 09 ANC CLINIC 10 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
705	What was the result of that HIV test?	POSITIVE 1 NEGATIVE 2 UNKNOWN/INDETERMINATE 3 DID NOT RECEIVE THE RESULT 4 DON'T KNOW 8 REFUSED 9	END OF MODULE
706	What was the month and year of your first HIV positive test result? Please give your best guess. This will be the very first HIV positive test result that you have received. PROBE TO VERIFY DATE.	MONTH <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED 9999	
707	Of the following people, who have you told that you are HIV positive? CHECK ALL THAT APPLY.	NO ONE A SPOUSE/SEX PARTNER B DOCTOR C FRIEND D FAMILY MEMBER E OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	
708a	Now I would like to ask you questions about your experiences with health care providers.		
708	In the last 12 months, when you sought health care in a facility where your HIV status is not known, did you feel you needed to hide your HIV status?	YES 1 NO, NO NEED TO HIDE 2 NO, NO NEED TO ATTEND HEALTH FACILITY IN LAST 12 MONTHS 3 DON'T KNOW 8 REFUSED 9	
709	In the last 12 months, have you been denied health services including dental care, because of your HIV status?	YES 1 NO 2 NO ONE KNOWS MY STATUS 3 DON'T KNOW 8 REFUSED 9	

MODULE 8: HIV STATUS, CARE AND TREATMENT

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP						
800a	CHECK 705: IS THE RESPONDENT HIV POSITIVE?	YES 1 NO 2	SKIP → END MODULE						
800	Now I am going to ask you more about your experience with HIV support, care and treatment.								
801	After learning you had HIV, have you ever received HIV medical care from a doctor, clinical officer or nurse?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 803 → 806						
802	What is the main reason why you have never received HIV medical care from a doctor, clinical officer, or nurse?	FACILITY IS TOO FAR AWAY 01 I DON'T KNOW WHERE TO GET HIV MEDICAL CARE 02 COST OF CARE 03 COST OF TRANSPORT 04 I DO NOT NEED IT / I FEEL HEALTHY / NOT SICK 05 I FEAR PEOPLE WILL KNOW THAT I HAVE HIV IF I GO TO A CLINIC 06 RELIGIOUS REASONS 07 I'M TAKING TRADITIONAL MEDICINE 08 DO NOT TRUST THE STAFF / QUALITY OF CARE 09 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	→ 806						
803	What month and year did you first see a doctor, clinical officer or nurse for HIV medical care? PROBE TO VERIFY DATE.	MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> DON'T KNOW 98 REFUSED 99 YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> DON'T KNOW 9998 REFUSED 9999							
804	What month and year did you last see a doctor, clinical officer or nurse for HIV medical care?	MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> DON'T KNOW 98 REFUSED 99 YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> DON'T KNOW 9998 REFUSED 9999							
805A	CHECK 804: WAS MONTH AND YEAR LESS THAN 7 MONTHS FROM DATE OF INTERVIEW OR DID RESPONDENT ANSWER DON'T KNOW?	YES 1 NO 2	→ 806						
805	What is the main reason for not seeing a doctor, clinical officer or nurse for HIV medical care for more than 6 months?	FACILITY IS TOO FAR AWAY 01 DON'T KNOW WHERE TO GET HIV MEDICAL CARE 02 COST OF CARE 03 COST OF TRANSPORT 04 DO NOT NEED IT / I FEEL HEALTHY / NOT SICK 05 FEAR PEOPLE WILL KNOW THAT I HAVE HIV IF I GO TO A CLINIC 06 RELIGIOUS REASONS 07 TAKING TRADITIONAL MEDICINE 08 DO NOT TRUST THE STAFF / QUALITY OF CARE 09 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99							

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
806	Have you ever had a CD4 count test? The CD4 count tells you how sick you are with HIV and if you need to take ARVs or other HIV medications.	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 808A
807	What month and year were you last tested for your CD4 count?	MONTH <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED 9999	
808	Have you ever taken ARVs, that is, antiretroviral medications to treat HIV infection?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 810 → END MODULE
809	What is the main reason you have never taken ARVs?	NOT ELIGIBLE FOR TREATMENT 01 HEALTH CARE PROVIDER DID NOT PRESCRIBE 02 HIV MEDICINES NOT AVAILABLE 03 FEEL HEALTHY/NOT SICK 04 COST OF MEDICATIONS 05 COST OF TRANSPORT 06 RELIGIOUS REASONS 07 TAKING TRADITIONAL MEDICATIONS 08 OTHER 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	→ END MODULE
810	What month and year did you first start taking ARVs? PROBE TO VERIFY DATE.	MONTH <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99 YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 9998 REFUSED 9999	
811	Are you currently taking ARVs, that is, antiretroviral medications? By currently, I mean that you may have missed some doses but you are still taking ARVs.	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 813 → END MODULE
812	Can you tell me the main reason why you are not currently taking ARVs?	TROUBLE TAKING IT EVERYDAY 01 SIDE EFFECTS 02 FACILITY TOO FAR 03 COST OF MEDICATIONS 04 COST OF TRANSPORT 05 FEEL HEALTHY/NOT SICK 06 FACILITY WAS OUT OF STOCK 07 RELIGIOUS REASONS 08 TAKING TRADITIONAL MEDICINES 09 OTHER 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	→ END MODULE
813	People sometimes forget to take all of their ARVs every day. In the last 30 days, how many days have you missed taking any of your ARV pills? CODE '00' IF NONE.	NUMBER OF DAYS <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	

MODULE 9: TUBERCULOSIS AND OTHER HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
900	Now I will ask you about tuberculosis, or TB.		
901	Have you ever visited clinic for TB diagnosis or treatment?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	END MODULE
902	Have you ever been told by a doctor, clinical officer or nurse that you had TB?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	END MODULE
903	Were you ever treated for TB?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	END MODULE
904	Are you currently on treatment for TB?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	END MODULE
905	The last time you were treated for TB, did you complete at least 6 months of treatment?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

MODULE 10: GENDER NORMS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1001A	CHECK 203: IS THE RESPONDENT MARRIED OR LIVING TOGETHER WITH A [MAN/WOMAN] AS IF MARRIED?	YES 1 NO 2	END MODULE
1001	Who usually makes decisions about health care for yourself: you, your (spouse/partner), you and your (spouse/partner) together, or someone else?	SELF 1 SPOUSE/PARTNER 2 JOINTLY 3 SOMEONE ELSE 4 DON'T KNOW 8 REFUSED 9	
1002	Who generally decides about how the money you receive/make is spent: you, your (spouse/partner), you and your (spouse/partner) together, or someone else?	SELF 1 SPOUSE/PARTNER 2 JOINTLY 3 SOMEONE ELSE 4 DON'T KNOW 8 REFUSED 9	
1003A	CHECK Q.607: DID RESPONDENT EVER SELL SEX, ANSWER CODED '7'?	YES 1 NO 2	END MODULE
1003B	CHECK Q.7 FROM HOUSEHOLD ROSTER: IS RESPONDENT 18 YEARS OR OLDER?	YES 1 NO 2	END MODULE
1003	You mentioned earlier that you have sold sex for money. Thank you for sharing your personal experiences with me. If you want to talk further about these experiences, I can refer you to a place that can provide you with help. FILL OUT REFERRAL FORM FOR CHILDREN IDENTIFIED AS TRAFFICKED MINORS. FILL OUT SUMMARY OF REFERRED TRAFFICKED MINORS. PROVIDE PARTICIPANT WITH LIST OF ORGANIZATIONS, IF NOT ALREADY GIVEN.		

APPENDIX G ADOLESCENT QUESTIONNAIRE

EARLY ADOLESCENT QUESTIONNAIRE (10-14 YEARS)

THIS QUESTIONNAIRE IS ADMINISTERED TO ELIGIBLE CHILDREN AGED BETWEEN 10-14 YEARS AFTER INFORMED PARENTAL/GUARDIAN CONSENT AND MINOR ASSENT.

100A	ENTER LINE NUMBER OF THE CHILD FROM THE HOUSEHOLD SCHEDULE:	<input type="text"/> <input type="text"/>
100B	ENTER NAME OF CHILD: _____ (CHILD'S NAME)	

MODULE 1: SOCIO-DEMOGRAPHIC CHARACTERISTICS

100C Now I will be asking you some general questions about yourself and education.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	CHECK THE HOUSEHOLD SCHEDULE: IS THE RESPONDENT MALE OR FEMALE?	MALE 1 FEMALE 2	
102	How old were you at your last birthday?	AGE IN COMPLETED YEARS DON'T KNOW 98 REFUSED 99	
103	Are you enrolled in school?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 109
104	During the last school week, did you miss any school days for any reason?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 106
105	Why did you miss school?	HAVE BEEN SICK 01 DON'T FEEL SAFE TRAVELING TO SCHOOL 02 DON'T FEEL SAFE WHILE IN SCHOOL 03 HAVE TO LOOK AFTER MY FAMILY 04 THERE'S NOT ENOUGH MONEY TO SEND ME TO SCHOOL 05 SCHOOL IS TOO FAR AWAY 06 HAVE TO WORK 07 HAVE A CHILD OR I AM PREGNANT (GIRLS ONLY) 08 MISSSED TOO MUCH SCHOOL BECAUSE OF MY PERIOD (MENSTRUATION) (GIRLS ONLY) 09 OTHER 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	
106	What is the highest level of school you have attended?	PRIMARY 01 JUNIOR SECONDARY 02 SENIOR SECONDARY 03 A-LEVEL 04 KORANIC/RELIGIOUS ONLY (NO FORMAL EDUCATION) 05 DON'T KNOW 98 REFUSED 99	
107	What grade/form/year are you in now, at that level?	NONE 00 YEARS DON'T KNOW 98 REFUSED 99	<input type="text"/> <input type="text"/>

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
108	What grade/form/year were you in last year?	NONE 00 YEARS <input type="text"/> 01 DON'T KNOW 98 REFUSED 99	→ END MODULE
109	Why are you not enrolled in school?	I HAVE BEEN SICK 01 I DON'T FEEL SAFE TRAVELING TO SCHOOL 02 I DON'T FEEL SAFE WHILE IN SCHOOL IN SCHOOL 03 I DON'T LIKE SCHOOL 04 I HAVE TO LOOK AFTER MY FAMILY 05 THERE'S NOT ENOUGH MONEY TO SEND ME TO SCHOOL 06 SCHOOL IS TOO FAR AWAY 07 I HAVE TO WORK 08 I HAVE A CHILD OR IS PREGNANT (GIRLS ONLY) 09 MISSSED TOO MUCH SCHOOL BECAUSE OF MY PERIOD (MENSTRUATION) (GIRLS ONLY) 10 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	
110	Have you ever attended school?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
111	When was the last time you regularly attended school? Would you say it was less than a year ago or more than a year ago?	LESS THAN 1 YEAR AGO 1 1 YEAR OR LONGER 2 DON'T KNOW 8 REFUSED 9	
112a	What is the highest level of school you have attended?	PRIMARY 01 JUNIOR SECONDARY 02 SENIOR SECONDARY 03 A-LEVEL 04 KORANIC/RELIGIOUS ONLY (NO FORMAL EDUCATION) 05 DON'T KNOW 98 REFUSED 99	→ END MODULE
112	What is the highest [CLASS/YEAR] you completed at that level?	NONE 00 CLASS/YEAR <input type="text"/> 01 DON'T KNOW 98 REFUSED 99	

MODULE 2: PARENTAL SUPPORT

200 Now I will ask you about your parents. For each question, you can answer 'Always', 'Most of the time', 'Sometimes', 'Rarely', 'Never' or 'Don't know', or you can refuse to answer.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
201	Do your parents/guardians understand your problems and worries?	ALWAYS 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 8 REFUSED 9	
202	Do your parents/guardians really know what you were doing with your free time when you were not at school or work?	ALWAYS 1 MOST OF THE TIME 2 SOMETIMES 3 RARELY 4 NEVER 5 DON'T KNOW 8 REFUSED 9	

MODULE 3: ALCOHOL AND DRUGS

300 Now I will ask you some questions about alcohol and drugs or substances that you may have taken that were not given to you by doctor. Your answers will not be told to anyone, even your parents. For each question, you can always tell me you 'Don't know' or you can refuse to answer any question.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
301	Have you ever had alcohol? For example, wine, beer or liquor? SHOW GRAPHIC OF COMMON ALCOHOLIC BEVERAGES.	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 303
302	During the past 1 month, on how many days did you have at least one drink containing alcohol?	NUMBER OF DAYS <input type="text"/> <input type="text"/>	
		DON'T KNOW 98 REFUSED 99	
303	Have you ever tried drugs such as Marijuana, also known as weed, or Benylene with Codeine, or Tramadol, or similar drugs?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
304	What drugs have you ever tried? ASK: Anything else?	MARIJUANA (WEED) A BENYLENE WITH CODEINE B TRAMADOL C COCAINE D HEROINE (CHARLY) E SOLUTION F CRACK G INJECTABLE H ROCHI I OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	

MODULE 4: CONDOMS

400 Now I would like to ask you some questions about condoms. Your answers will not be told to anyone, even your parents. For each of the questions, you can tell me you 'don't know' or you can refuse to answer any question.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
401	Do you know what a condom is?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
402	Do you know where to get a condom?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 406
403	Where can a person go to get a condom? SELECT ALL THAT APPLY	CLINIC/HOSPITAL A KIOSK/SHOP B PHARMACY C LOCAL FREE DISPENSERY D FRIENDS/PEERS E BOYFRIEND/GIRLFRIEND F OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	
404	If you wanted to, could you yourself get a condom?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 406
405	Why is it not easy for you to get a condom? SELECT ALL THAT APPLY	TOO FAR A COSTS TOO MUCH B DO NOT WANT OTHERS TO KNOW C OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	
406	Have you ever seen a male condom demonstration? By a condom demonstration, I mean someone like a nurse, peer educator, or another trained adult showed how a male condom is correctly used.	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

MODULE 5: SEXUAL BEHAVIOR

500 The next questions ask about sexual behavior. There is no right or wrong answer. Your responses will not be linked to you in any way or shared with anyone, including your parents. For each question, you can always tell me you 'don't know' or you can refuse to answer any question.

PLEASE LOOK OUT FOR SIGNS OF DISTRESS IN CHILD WHEN ASKING THE FOLLOWING SEXUAL BEHAVIOR QUESTIONS. IF THE CHILD SEEMS DISTRESSED, ASK CHILD IF HE/SHE WANTS TO STOP THE INTERVIEW.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501	Do you know what sex is?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 600
501A	Have you ever had sex?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 600
502	Have you ever had vaginal, anal or oral sex? Vaginal sex is when a penis enters a vagina. Anal sex is when a penis enters an anus. Oral sex is when a person puts his/her mouth on the penis or vagina of another person. SELECT ALL THAT APPLY.	VAGINAL A ANAL B ORAL C DON'T KNOW Y REFUSED Z	→ 600
503	How old were you when you had sex for the first time?	AGE IN YEARS <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	
504	The first time you had sex, was it because you wanted to or because you were forced?	WANTED TO 1 FORCED 2 DON'T KNOW 8 REFUSED 9	→ 506
505	The first time you had sex, were you physically forced or were you pressured into having sex through harassment, threats or tricks?	PHYSICALLY FORCED 1 PRESSURED 2 DON'T KNOW 8 REFUSED 9	→ 507
506	What was the main reason that you had sex for the first time?	JUST HAPPENED 01 FRIENDS PRESSURED ME TO HAVE SEX 02 TO SHOW MY LOVE/FEEL LOVED 03 WANTED TO HAVE SEX 04 BOYFRIEND/GIRLFRIEND WANTED TO HAVE SEX 05 FOR MONEY/GIFTS 06 WANTED TO HAVE A BABY 07 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	
507	How old was the person you first had sex with? Please give your best guess.	AGE IN YEARS <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED 99	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP			
508A	CHECK Qs. 401 AND 504: DOES RESPONDENT KNOW WHAT A CONDOM IS, IF THE CODED ANSWER IS '2'	YES 1 NO 2	→ 509			
508B	CHECK 504: WAS THE RESPONDENT FORCED TO HAVE SEX?	YES 1 NO 2	→ 509			
508	The first time you had sex, was a condom used?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9				
509	In total, how many different people have you had sex with? Please give your best guess.	NUMBER OF PARTNERS ... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td></tr></table> DON'T KNOW 998 REFUSED 999				
510A	CHECK 401: DOES RESPONDENT KNOW WHAT A CONDOM IS?	YES 1 NO 2	→ 512A			
510B	CHECK 504: WAS THE RESPONDENT FORCED TO HAVE SEX (CODE '2')?	YES 1 NO 2	→ 510			
510C	CHECK 509: DID THE RESPONDENT ANSWER '001', ONLY ONE PARTNER?	YES 1 NO 2	→ 512A			
510	The last time you had sex was a condom used?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9				
511	How often do you use a condom during sex? Would you say, Always? Sometimes? or, Never?	ALWAYS 1 SOMETIMES 2 NEVER 3 DON'T KNOW 8 REFUSED 9				
512A	CHECK 504: WAS THE RESPONDENT FORCED TO HAVE SEX (CODE '2')?	YES 1 NO 2	→ 512			
512B	CHECK 509: DID THE RESPONDENT ANSWER '001', ONLY ONE PARTNER?	YES 1 NO 2	→ 513A			
512	Have you ever had sex with someone because he/she provided you with, or you expected that he/she would provide you with gifts, help you to pay for things or help you in other ways such as giving you food or paying for school fees?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9				
513A	CHECK: IS RESPONDENT A GIRL?	YES 1 NO 2	→ 514			
513	Have you ever been pregnant?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9				
514	Have you ever talked with a parent or guardian about sex?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9				

MODULE 6: HIV KNOWLEDGE

600 Now I would like to ask you some questions about what you know about some things related to HIV. For each question, you can answer 'Yes', 'No', or 'Don't know' or you can refuse to answer.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	Have you ever heard of HIV? PROBE: Anywhere else? RECORD ALL MENTIONED	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ 700
602	From where have you heard about HIV?	SCHOOLS/TEACHERS A PARENTS/GUARDIANS/FAMILY B FRIENDS C RELIGIOUS LEADERS D INTERNET E MOBILE PHONE F HEALTH PROVIDERS/DOCTORS/ NURSES/CLINICAL OFFICERS G TELEVISION/FILM H RADIO I COMMUNITY HEALTH WORKERS J OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	
603	Have you ever discussed HIV with your parents or guardian?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
604	Have you taken part in any of the HIV prevention programs? For example: a) Family, life, and health education (FLHE)? b) Sex and sexuality training (a part of the FHLE, but sometimes offered on its own)? c) In-school youth program? d) Out of school youth program? e) HIV awareness training or peer education sessions? f) Training on abstinence and being faithful? g) HIV testing services (HTS)? SELECT ALL THAT APPLY PROBE: Any other prevention programs? SHOW CHILD THE LOGO FOR EACH PROGRAM	FAMILY, LIFE, & HEALTH EDUCATION A SEX AND SEXUALITY TRAINING B IN-SCHOOL YOUTH PROGRAM C OUT OF SCHOOL YOUTH PROGRAM .. D HIV AWARENESS TRAINING OR PEER EDUCATION SESSIONS E TRAINING ON ABSTINENCE AND BEING FAITHFUL F HIV TESTING SERVICES (HTS) G NO, NOT TAKEN PART W OTHER _____ X (SPECIFY) DON'T KNOW Y REFUSED Z	
605	Can a person reduce their chance of getting HIV by not having sex?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
605A	CHECK 401: DOES RESPONDENT KNOW WHAT A CONDOM IS?	YES 1 NO 2	→ 607
605B	CHECK 501: DOES RESPONDENT KNOW WHAT SEX IS?	YES 1 NO 2	→ 607
606	Can a person reduce their chance of getting HIV by using condoms when having sex?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
607	Can a healthy-looking person have HIV or AIDS?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
608	Can a mother with HIV or AIDS pass HIV to her unborn baby?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
609	Are there medicines that people with HIV or AIDS can take to help them live longer?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
610	Can male circumcision help prevent HIV infection? Circumcision is the removal of the foreskin from a penis.	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
611	Can ARVs make people with HIV less likely to spread the virus?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
612	Can ARVs rid HIV from an HIV-positive person's body?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

MODULE 7: HIV RISK PERCEPTION

700 One can get HIV through various ways. Now I will ask you some questions on what you know about your risks of getting HIV.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701A	CHECK 601: HAS THE RESPONDENT EVER HEARD OF HIV?	YES 1 NO 2	→ 800
701	How likely do you think it is for you to get HIV? Would you say, it is ... Very likely? Somewhat likely? Not likely? Or, You already know you have HIV?	VERY LIKELY 1 SOMEWHAT LIKELY 2 NOT LIKELY 3 ALREADY HAVE HIV 4 DON'T KNOW 8 REFUSED 9	→ 703 → 800 → END MODULE
702	What is the main reason you think you are likely to get HIV?	HAD SEX WITHOUT A CONDOM 01 HAVE OR HAD MANY BOY/GIRL FRIENDS 02 HAVE HAD BLOOD TRANSFUSIONS 03 MY MOTHER/FATHER/CLOSE RELATIVE HAS HIV 04 DON'T TRUST MY BOY/GIRLFRIEND 05 SELF SICK 06 BOY/GIRLFRIEND IS SICK OR HAS DIED 07 DESERVE IT/I AM A BAD PERSON 08 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	→ END MODULE
703	What is the main reason you think you are not likely to get HIV?	ABSTINENT 01 WILL WAIT UNTIL MARRIAGE TO HAVE SEX 02 ALWAYS USE CONDOMS 03 TRUST MY PARTNER 04 HAVE ONLY ONE PARTNER 05 GO TO CHURCH/RELIGIOUS HOUSE 06 AM A GOOD PERSON 07 OTHER _____ 96 (SPECIFY) DON'T KNOW 98 REFUSED 99	

MODULE 8: HIV TESTING

800 HIV testing is the best way to confirm that someone has HIV. I will like to ask you some questions about HIV testing. Your answers will not be told to anyone, even your parents. For each question, you can tell me you 'don't know' or you can refuse to answer any question.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801a	CHECK 601: HAS THE RESPONDENT EVER HEARD OF HIV?	YES 1 NO 2	→ 900
801	To what extent do you agree with the following statement: Everyone should get tested for HIV. Do you strongly agree, agree, disagree, or strongly disagree?	STRONGLY AGREE 1 AGREE 2 DISAGREE 3 STRONGLY DISAGREE 4 DON'T KNOW 8 REFUSED 9	
802	To what extent do you agree with the following statement: Only persons who think they might have HIV should get an HIV test. Do you strongly agree, agree, disagree, or strongly disagree?	STRONGLY AGREE 1 AGREE 2 DISAGREE 3 STRONGLY DISAGREE 4 DON'T KNOW 8 REFUSED 9	
803	Have you ever been tested for HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
804	Did you receive the results of any of your HIV tests?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	→ END MODULE
805	What was the result of that HIV test? SOME PARTICIPANTS MAY REPORT BEING TESTED MORE THAN ONCE. IF THEY REPORT GETTING A POSITIVE RESULT AND ANOTHER RESULT (I.E. A PREVIOUS NEGATIVE RESULT), SELECT POSITIVE.	HIV POSITIVE 1 HIV NEGATIVE 2 UNKNOWN/DON'T KNOW 8 REFUSED 9	→ END MODULE
806	Are you currently on treatment for HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

MODULE 9: HIV STIGMA

900 Now I would like to ask you some more questions about your attitude towards people living with HIV.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
901a	CHECK 601: HAS THE RESPONDENT EVER HEARD OF HIV?	YES 1 NO 2	END →MODULE
901b	CHECK 701: DOES RESPONDENT ALREADY HAVE HIV (CODE 4)?	YES 1 NO 2	→ END MODULE
901c	CHECK 805: IS RESPONDENT HIV POSITIVE?	YES 1 NO 2	→ END MODULE
901	Would you be willing to share food with someone who has HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
902	Would you be friends with someone who has HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
903	Would you be comfortable to have a teacher who has HIV?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	

MODULE 10: SOCIAL NORMS, INTENTION TO ABSTAIN, SELF-EFFICACY AND ASSERTIVENESS

1000 Now I would like to ask you some questions about social norms, your belief and your confidence. This is to get a better understanding of you and your peers attitudes towards sex.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1000a	CHECK 501: DOES RESPONDENT KNOW WHAT SEX IS?	YES 1 NO 2	→ 1005
1001	Do you think all, many, some, a few or none of your friends are having sex?	ALL 1 MOST 2 SOME 3 A FEW 4 NONE 5 DON'T KNOW 8 REFUSED 9	
1002	Do you feel pressured by your boyfriend/girlfriend to have sex?	YES 1 NO 2 DON'T HAVE BOYFRIEND/GIRLFRIEND 3 DON'T KNOW 8 REFUSED 9	
1003	Do you feel pressured by your friends to have sex?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
1004	If you did not want to have sex with someone, could you tell them that you do not want to have sex with them?	YES 1 NO 2 DON'T KNOW 8 REFUSED 9	
1005	This is the end of survey. Thank you very much for your time and your responses. Your responses will be useful to HIV programming and services among adolescents in Nigeria.		

APPENDIX H SURVEY CONSENT FORMS

Appendix H1: Survey Consent for Household Interview

Interviewer reads:

What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Nigeria AIDS Indicator and Impact Survey

Hello. My name is_____ . I would like to invite you to take part in this survey about HIV in Nigeria. The Federal Ministry of Health and the National Agency for the Control of AIDS (NACA) are leading this survey. They are carrying out the survey with the United States Centers for Disease Control and Prevention (CDC).

Purpose of survey

This survey will help us know how many people in Nigeria have HIV and need health services. It will also tell us about people's risk for getting HIV.

We plan to invite about 98,207 households to take part in this survey. If you take part, you will help the Government of Nigeria make health services better in the country.

Survey Procedures

If you agree to take part in this survey, you will be invited to take part in two interviews: a household interview and a single person interview. In the household interview, we will ask you questions about persons living in your household and the things you have. This interview will last for about 30 minutes.

After the household interview, we will invite you and persons living in your household to take part in single person interviews. The single person interview will take about 40 minutes. We will also offer HIV testing after the interview. We may also offer Hepatitis B and Hepatitis C testing. We will ask each person to give permission to take part before joining the survey.

Potential Risks/Discomfort

Some of the questions may make you feel uncomfortable. You are free to skip a question and continue. The information you provided will be protected in a secure place. Access to the information will be minimized and limited to persons carrying out this survey.

Potential Benefits

You may or may not benefit by taking part in this study. If you take part, you and your household members will get free testing for HIV in your home. In addition, some people may also get free Hepatitis B or Hepatitis C testing. The answers you give will help Government to improve the health services of Nigerians and to develop more effective programs to fight HIV and other diseases.

Alternative to Taking Part

Your alternative is not to take part. If you choose not to take part, the services you or any member of your household receive will not be affected.

Costs to Person Taking Part in the Survey

It will not cost you anything to take part in this study other than your time.

Payment to Person Taking Part in the Survey

You will not receive any payment for taking part in this survey

Confidentiality and Access to Records

Efforts will be made to protect your household information and your answers to the interview questions. A number will be used instead of your name to identify the answers you give. Any answers included in the final report will not have your name or household on it. The information we collect from you will not be released outside of the study partners listed below unless there is an issue of safety.

{DO NOT READ ALOUD}

The following individuals and/or agencies may look at your household records to make sure that we are protecting your rights as someone who takes part in research:

- Staff members from the Nigerian National Health Research Ethics Committees (NHREC) and the Institutional Review Boards at the Centers for Disease Control and Prevention (CDC; Atlanta, USA)
- The United States Office of Human Research Protections and other government agencies that look at the safety of persons taking part in research to ensure we are protecting your child's rights as a person who takes part in this survey
- Study staff and study monitors

[READ FROM HERE]

Everyone using the survey information will work to keep your personal information secret. Your personal information will not be given out. If you have any questions or concerns about your household rights, or if you believe those rights were violated due to our negligence, you can contact the National Health Research Ethics Committee (NHREC) at

[INDICATE ADDRESS OF POC]

Address:

Federal Ministry of Health,
Federal Secretariat Complex Shehu
Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

Refusal to Take Part and Right to Withdraw

Your taking part in this survey is voluntary. You do not have to take part in this survey. You are free to change your mind at any time and stop taking part. Refusal to take part or stopping to take part will not affect the health services you or any member of your household receive. If you decide not to take part or stop taking part, we will ask your permission to give us the reasons and the information you gave will not be included in analysis. If you have any questions about the survey, or feel that you have been harmed by taking part, you should contact the responsible investigator:

[INDICATE ADDRESS OF POC]

Dr. Evelyn Ngige
Address: Federal Ministry of Health
Phone: +234-803-303-8090
Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
Address: USCDC Nigeria Country Office
Phone: +234-806-051-0525
Email: idalhatu@cdc.gov

Removal from Survey

The person in charge of the survey can remove your household from the survey without your consent. We will notify you if this happens. You will have a chance to ask questions.

Do you want to ask me anything about the survey?

Consent Statement

I have read this form and/or someone has read it to me. I was encouraged to ask questions and given time to ask questions. Any questions that I had have been answered satisfactorily. I agree to take part in the household interview. I know that after choosing to be in the interview, I may withdraw at any time. My taking part is voluntary. I have been offered a copy of this consent form.

Do you agree to do the household interview? 'YES' means that you agree to do the interview. 'NO' means that you will NOT do the interview.

Yes No

Head of household signature or mark _____ Date: ___/___/___

Printed name of head of household _____

Household ID number _____

[For illiterate participants]

Signature of witness _____ Date: ___/___/___

Printed name of witness _____

Signature of person obtaining consent _____ Date: ___/___/___

Printed name of person obtaining consent _____

Survey staff ID number _____

**Appendix H2: Survey Consent for Individual Adult Interview and Blood Draw
(Age 18 – 64 years)**

Nigeria AIDS Indicator and Impact Survey (NAIIS)

[IF PARTICIPANT HAS NOT BEEN THROUGH HOUSEHOLD CONSENT]

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Hello. My name is_____ . I would like to invite you to take part in this survey about HIV in Nigeria. The Federal Ministry of Health and the National Agency for the Control of AIDS (NACA) are leading this survey. They are doing it with the United States Centers for Disease Control and Prevention (CDC). You are invited to take part in this survey because you are a member of a household. Taking part in this survey is voluntary.

Purpose of survey

This survey will help us know how many people in Nigeria have HIV and need health services. It will also tell us about people's risk for getting HIV.

We plan to invite about 137,289 members of households like you to take part in this survey. If you take part, you will help the Government of Nigeria make health services better in the country.

→ GO TO SURVEY PROCEDURES

[IF PARTICIPANT HAS BEEN THROUGH HOUSEHOLD CONSENT]

Hello, my name is_____ .

Survey Procedures

If you take part in this survey, you will be invited to take part in a single person interview. We will ask you questions about yourself, your sexual and social life, and your awareness of HIV services. We will also ask for your permission to do a free HIV test on you. The interview will take about 40 minutes.

The information is collected on this tablet. The information is stored securely and can only be accessed by selected survey staff. The interview will take place in private here in your house or an area around your house.

After the interview, we will offer you HIV testing and may also offer Hepatitis B and Hepatitis C testing. We will also ask your permission to use your leftover blood later in the laboratory for future testing.

Blood draw and HIV testing procedures

If you agree to take the HIV, test trained laboratory personnel will take a small amount, about 14 mL or about one tablespoon of blood from your arm. If it is not possible to take blood from your arm, then we will try to take a few drops of blood from your finger. We will give you the HIV results today and offer you conselling services . The testing and counselling session will take about 40 minutes.

If we find HIV in your blood, you will get a Hepatitis B and C test here at home. If we dont find HIV in your blood, you may or may not be selected for Hepatitis B and C testing. We will also test your blood for CD4 cells here at home. The

number of CD4 cells shows how well your body can fight HIV infection and other diseases. We will also test the CD4 cells of some people who do not have HIV in their blood. We will also send your blood to a laboratory to find out your viral load, which is the amount of HIV in your blood. We will send your viral load results to a health facility in about 8-10 weeks from now. We will give you a referral form and information so that you can consult a nurse or doctor to learn more about your HIV, CD4 cells, viral load test results, and your health.

We will also do other additional tests related to HIV.

If we have test results that might help your care or treatment, we will contact you to tell you how you and your doctor or nurse may get these results.

Storage of specimens

We would also like your permission to keep your leftover blood sample for future research tests. These tests may be about HIV or other health issues important for the health of the Nigerian people, such as nutrition or immunization. This will help the Federal Ministry of Health improve the health of the people of Nigeria. This sample will be kept for at least five years and your information will be linked to the stored sample for the 5-year period and delinked afterward. We will attempt to tell you about any test results that are important to your health during the five-year period. Your leftover blood will not be sold or used for profit making. If you do not agree for us to keep your blood sample, we will destroy your blood sample after all tests for this survey are completed.

Potential Risks/Discomfort

Some of the questions may make you feel uncomfortable. You are free to skip a question and continue. The information you provided will be protected in a secure place.

The risks in drawing blood are very small. They include brief pain from the needle stick, bruising, lightheadedness, bleeding, and rarely, infection where the needle enters the skin. If you have any discomfort, bleeding or swelling at the site, please let us know.

You may learn that you are infected with HIV. Learning that you have HIV may cause some emotional discomfort. You will receive advice on how to cope with learning that you have HIV.

If you are selected for Hepatitis B and C testing, you will learn your Hepatitis B and C status. This may cause some emotional discomfort. You will receive advice on how to cope and where to go for treatment.

We will do everything we can to keep the information on your HIV status a secret. Access to the information will be minimized and limited to persons carrying out this survey.

Potential Benefits

You may or may not benefit by taking part in this study. The answers you give will help Government to improve the health services of Nigerians and to develop more effective programs to fight HIV and reduce its spread in the community. The main benefit for you to take part in this survey is the chance to learn more about your health today. If we do not find HIV in your blood, you will learn about what you can do to prevent becoming infected by HIV. If we find HIV in your blood, the benefit is that you will know your HIV status and where to go for life-saving treatment that is provided by the Federal Ministry of Health and the National Agency for the Control of AIDS (NACA) at no cost to you. If you already know that you are HIV positive and are on HIV treatment, the CD4 and viral load tests will help your nurse or doctor know how well your treatment is working.

Alternative to Taking Part in the Survey

Your alternative is not to take part. If you choose not to take part, the services you or any member of your household receive will not be affected.

Costs to Person Taking Part in the Survey

It will not cost you anything to take part in this study other than your time.

Payment to Person Taking Part in the Survey

You will not receive any payment for taking part in this survey

Confidentiality and Access to your Health Information

Efforts will be made to protect your personal information and your answers to the interview questions. A number will be used instead of your name to identify the answers you give. Any answers included in the final report will not have your name on it. The information we collect during the survey will not be released outside of the survey groups unless there is an issue of safety. Everyone using the survey information will work to keep your personal information confidential.

[INTERVIEWER: DO NOT READ ALOUD]

The following individuals and/or agencies may look at your research records to make sure that we are protecting your rights as someone taking part in research:

- Staff members from the Nigerian National Health Research Ethics Committees (NHREC) and the Institutional Review Boards at the Centers for Disease Control and Prevention (CDC; Atlanta, USA).
- The United States Office of Human Research Protections and other government agencies that look at the safety of persons taking part in research to ensure we are protecting your child's rights as a person who takes part in this survey.
- Study staff and study monitors.

[INTERVIEWER: READ FROM HERE]

Your permission to allow us to use and share your name and contact information with the groups above will expire two years after the end of the survey. If you want to leave the study, have any questions about the survey, or feel that you have been harmed by taking part, you should contact NHREC at:

[INDICATE ADDRESS OF POC]

Address:

Federal Ministry of Health,
Federal Secretariat Complex Shehu
Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

[READ FROM HERE]

Refusal to Take Part and Right to Withdraw

Your taking part in this survey is voluntary. You are free to withdraw the permission to use your information and leftover blood at any time. Refusal to take part or withdrawal from the survey will not affect the health services you or any member of your household receive. You do not have to take part in giving your blood samples. Even after you agree to give the blood samples you are free to change your mind and stop taking part. You may agree to let us test your blood for HIV and CD4 counts and other HIV tests. If you do not want to give blood, please tell us. If you decide to stop taking part, there will be no adverse physical, social, economic, legal or psychological consequences for your decision to withdraw from the survey. If you have questions or concerns or complaints or if you need to report a medical injury related to the survey, please contact the responsible investigator:

[INDICATE ADDRESS OF POC]

Dr. Evelyn Ngige
Address: Federal Ministry of Health
Phone: +234-803-303-8090
Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
 Address: US CDC Nigeria Office
 Phone: +234-806-051-0525
 Email: idalhatu@cdc.gov

Do you want to ask me anything about the survey?

Consent Statement

I have read this form and/or someone has read it to me. I was encouraged to ask questions and given time to ask questions. Any questions that I had, have been answered satisfactorily. I agree to take part. I know that after choosing to take part, I may withdraw at any time. My taking part is voluntary. I have been offered a copy of this consent form.

1. Do you agree to do the individual interview? 'YES' means that you agree to do the interview. 'NO' means that you will NOT do the interview.

_____ Yes _____ No

2. Do you agree to give blood for HIV, Hepatitis B and C testing and related testing? 'YES' means that you agree to give blood for HIV testing and related testing. 'NO' means that you will NOT give blood for HIV testing, Hepatitis B, and related testing.

_____ Yes _____ No

3. Do you agree to have your leftover blood stored for future research? 'YES' means that you agree to have these blood samples stored for future testing. 'NO' means that these blood samples will NOT be stored for future research.

_____ Yes _____ No

4. Do you agree to be contacted should these future studies have clinically actionable results that are related to your health? 'YES' means that you agree to be contacted. 'NO' means that you don't agree to be contacted.

_____ Yes _____ No

Participant signature or mark _____ Date: ____/____/____

Printed name of participant _____

Participant ID number _____

[For illiterate participants]

Signature of witness _____ Date: ____/____/____

Printed name of witness _____

Signature of person obtaining consent _____ Date: ____/____/____

Printed name of person obtaining consent _____

Survey staff ID number _____

Appendix H3: Parent/Guardian Permission for Children, ages 0-9 years

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Now I would like to ask permission for your son/daughter to take part in the survey. Your child's taking part will help the Federal Ministry of Health and National Agency for the Control of AIDS (NACA) to plan well to fight HIV.

[IF PARENT/GUARDIAN HAS BEEN THROUGH CONSENT PROCESS FOR INTERVIEW/BLOOD DRAW]**Survey Procedures**

If you give permission for your child to take part, we will go ahead as mentioned in your consent as follows:

- **[IF CHILD IS 2-9 YEARS OLD]** To do the HIV test in your home, a trained laboratory personnel will take about 6 mL or about 1 teaspoon of blood from your child's arm or a few drops of blood from your child's finger.
- **[IF CHILD IS <2 YEARS OLD]** A trained laboratory person will take a few drops (about 1 mL) from your child's finger or heel for the HIV test.
- We will discuss the results with you and your child, if you want to discuss them with him/her
- If your child has HIV, he/she will get a CD4 test and receive the results today.
- If your child is HIV positive, his/her blood will be sent to a laboratory to determine the viral load. The results will be returned to the clinic or hospital you would like in 8-10 weeks.
- We will give you a referral form so you and your child can consult with a doctor regarding his/her HIV test, and viral load results.
- We will ask for your permission to store your child's leftover blood for future research tests

[FOR CHILDREN ≤18 months ONLY]

The body makes antibodies to fight HIV. Antibodies from a mother with HIV can enter the baby's blood during pregnancy. The test we perform on your child today will let us know if your child has the antibodies that fight HIV. If we find the antibodies, it does not mean your child has the virus in his/her blood. It just shows that he/she has the antibodies to HIV and that the mother is positive. We will need to send your child's blood to a lab for a special test to know if he/she has the HIV virus. If you give us the name of a clinic or hospital, we can send the result there in about 8 to 10 weeks from now. If you give us your contact information, we will also contact you to tell you that the results have been sent to the clinic or hospital you chose. You will be able to talk to a doctor or nurse at the clinic or hospital about the test result. With your permission, the Federal Ministry of Health will use your child's leftover blood sample for future unspecified test results that may be important towards improving the health of Nigerian children

→ GO TO POTENTIAL STORAGE OF SPECIMENS**[IF PARENT/GUARDIAN HAS NOT BEEN THROUGH CONSENT PROCESS FOR INTERVIEW/BLOOD DRAW]**

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Purpose of survey

This survey will help us know how many people in Nigeria have HIV and need health services. It will also tell us about people's risk for getting HIV.

We plan to invite about 31,000 children to take part in this survey. If you give permission for your child to take part, you will help the Government of Nigeria make health services better in the country.

Survey Procedures

[FOR CHILDREN 2-9 YEARS OLD] If you agree to allow your child to take part in the survey, a trained laboratory person will take a small amount or about 6 mL of blood or about 1 teaspoon from your child's arm to perform an HIV test here in your home. If it is not possible to take blood from your child's arm, then we will try to take a few drops of blood from your child's finger.

[FOR CHILDREN <2 YEAR OLD] If your child is less than 2 years, we will take a few drops (about 1 mL) from your child's finger or heel for the HIV test.

We will give you the results today and counsel you about the results and how to share the results with your child if you decide to share them with him/her. If you would like, we can discuss the test results together with your child. The entire testing and counselling session will take about 40 minutes.

If your child tests positive for HIV, We will test his/her blood for C4 cells here and also send his/her blood to a laboratory to test the amount viral load in his/her blood. CD4 cells are the part of your immune system that fights HIV infection and other diseases while viral load is the amount of HIV in the blood. We will also test the CD4 level of some children without HIV. If you provide us with the name of a health facility, we can send your child's viral load results there about 8 to 10 weeks from now.

We will give you a referral form and information so that you and your child can consult with a doctor or nurse to learn more about his/her HIV test, CD4 count, and viral load. If we have test results that might guide your child's care or treatment, we will contact you to tell you how you and your child's doctor or nurse may get these results.

[For children ages 0-<18 months only]

The body makes antibodies to fight HIV. Antibodies from a mother with HIV can enter the baby's blood during pregnancy. The test we perform on your child today will let us know if your child has antibodies to HIV and if the mother is HIV positive. If we find the antibodies, it does not mean your child has the HIV virus in his/her blood. It just tells us that he/she has antibodies to HIV. We will need to send your child's blood sample to a lab for a special test to know if he/she truly has the HIV virus. If you give us the name of a clinic or hospital you would like to send the result to, we can send the result there in about 8 - 10 weeks from now. If you give us your contact information, we will also contact you to tell you that the results have been sent to the clinic or hospital,. You will be able to talk to a doctor or nurse at the clinic or hospital about the test result.

Storage of specimens

We would like to ask for your permission to store your child's leftover blood sample for future research tests. These tests may be about HIV or other health issues important for the health of about 170 million Nigerians, such as nutrition or immunization. This sample will be stored for at least five years, but your child's name will be linked to the sample for only five years. We will attempt to tell you about any test results during the five-year period that are important for your child's health. Your child's leftover blood sample will not be sold or used for profit making. If you do not agree to long-term storage of your child's blood samples, we will destroy your child's blood samples after all tests for this survey are completed.

Potential Risks

The risks to being in the survey and drawing blood are small. They include brief pain from the needle stick, bruising, lightheadedness, bleeding, and rarely, infection where the needle enters the skin. We will do everything we can to minimize these risks and keep your child's information private.

Potential Benefits

The main benefit for your child to be in the survey is the chance to learn more about his/her health today. Some children who take part will have HIV virus found in their blood. If this happens to your child, the benefit is that you will learn his/her HIV and will learn where to take your child for life-saving treatment for HIV that is provided by the Federal Ministry of Health at no cost to you. If you already know that your child has HIV and he/she is taking treatment, the CD4 and viral load tests can help your child's doctor or nurse to find out how well the treatment is working. Your child's taking part in this research could help us learn more about children and HIV in Nigeria and how HIV prevention and treatment programs are working.

Alternative to Taking Part in the Survey

Your alternative is not to let your child take part in the survey. If you choose not to let him/her takes part, the services you and your child receive will not be affected in any way.

Costs to Person Taking Part in the Survey

There is no cost to you for your child being in the survey. All the tests are given at no cost to you.

Payment to Person Taking Part in the Survey

You should also know that you and your child will not be paid for taking part in the survey.

Confidentiality and Access to Your Health Information

We will do everything we can to keep your child's taking part in the survey private. The information we collect from your child will be identified by a number and not by your name or your child's name. Your name and your child's name will not appear when we share survey results. The information we collect from your child will not be released outside of the survey groups listed below unless there is an issue of safety.

[INTERVIEWER: DO NOT READ ALOUD]

The following individuals and/or agencies will be able to look at your child's research records to help oversee the conduct of this survey:

- Staff members from the Institutional Review Boards or Ethics Committees overseeing the conduct of this survey to ensure that we are protecting your child's rights as he/she takes part in the survey. These include the National Health Research Ethics Committee (NHREC) and the Institutional Review Boards at the Centers for Disease Control and Prevention (CDC; Atlanta, USA),
- The United States Office of Human Research Protections and other government agencies that oversee the safety of human subjects to ensure we are protecting your child's rights as he/she takes part in this survey
- Study staff and study monitors

[INTERVIEWER: READ FROM HERE]

Your permission to allow us to use and share your child's name and contact information with the groups above will expire two years after the end of the survey. If you want your child to leave the study, have any questions about the survey, or feel that your child has been harmed by taking part, you should contact NHREC at:

[INDICATE ADDRESS OF POC]

Address:

Federal Ministry of Health,
Federal Secretariat Complex Shehu
Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

Refusal to Take Part and Right to Withdraw

It is your decision whether you will allow your child to join the survey. Your child may stop taking part at any time. If your child does not take part, it will not affect your child's health care in any way. Even after you agree to give your child's blood samples, you are free to change your mind and stop taking part. You may agree to let us test your child's blood for HIV and CD4 counts and other HIV testing and not agree to have his/her blood be kept for future research tests. If you do not want to give your child's blood, please tell us. If you decide to stop taking part, we will request you to complete a refusal/withdrawal form and the samples you gave will not be included in analysis. Your permission to allow us to use and share your child's information with the groups above will expire two years after the end of the survey. If you want to leave the survey, or have the leftover specimen destroyed, have any questions about the survey, or feel that you have been harmed by taking part, you should contact the responsible investigator: ...

[INDICATE ADDRESS OF POC]

Dr. Evelyn Ngige

Address: Federal Ministry of Health

Phone: +234-803-303-8090

Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
 Address: US CDC Nigeria Office
 Phone: +234-806-051-0525
 Email: idalhatu@cdc.gov

Do you want to ask me anything about your child's taking part in the survey?

Consent Statement

I have read this form, and/or someone has read it to me. I was encouraged to ask questions and given time to ask questions. Any questions I had have been answered satisfactorily. I agree for my child to take part in this survey. I know that after allowing my child to take part, I may change my mind and withdraw him/her from taking part in this survey at any time. I have been offered a copy of this consent form.

1. Do you agree that your child give blood for HIV testing and related testing? 'YES' means that you give your permission to have the nurse collect a sample of your child's blood for HIV testing and related testing. 'NO' means that your child will NOT give blood for HIV testing and related testing.

Yes No

(if "Yes" proceed to the next question)

2. Do you agree to have your child's leftover blood stored for future research? 'YES' means that you give permission for your child's leftover blood samples to be stored for future research. 'NO' means that your child's blood samples will NOT be stored for future research.

Yes No

3. Do you agree to be contacted should these future studies have clinically actionable results that are related to your child's health? 'YES' means that you agree to be contacted. 'NO' means that you don't agree to be contacted.

Yes No

Parent/guardian signature or mark _____ Date: ___/___/___

Printed name of parent/guardian _____

Parent/guardian ID number _____ (If applicable. If not applicable check here)

[For illiterate participants]

Signature of witness _____ Date: ___/___/___

Printed name of witness _____

Signature of person obtaining consent _____ Date: ___/___/___

Printed name of person obtaining consent _____

Survey staff ID number _____

Child's name (print) _____

Child's participant ID number _____

**Appendix H4: Parent/Guardian Permission for Child Interview and Blood Draw
[ages 10-17 years]**

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Now I would like to ask you to give us permission to invite your son/daughter to take part in the survey. Your child's taking part will help the Federal Ministry of Health and the National Agency for the Control of AIDS make HIV services better.

[IF PARENT/GUARDIAN HAS BEEN THROUGH CONSENT PROCESS FOR INTERVIEW/BLOOD DRAW]**Survey Procedures**

If you and your child agree, the following will happen, as described in your own consent:

- We will ask questions on HIV and your child's behaviors (about 40 minutes) in private. Your child's answers will not be shared with you.
- To do the HIV test in your home.

[IF 10-14 YEARS]:

- A trained lab technician will take about 6 mL (about 1 teaspoon) of blood from your child's arm or a few drops of blood from your child's finger.
- We will discuss the results with you. We can discuss the results with you and your child together, if you so choose.
- If your child is HIV positive, we will test his/her blood for CD4 cells count here at home. We will send his/her blood to a laboratory to determine the viral load. The results will be returned to the clinic or hospital you would like in 8 – 10 weeks. We will give you a referral form so you and your child can consult with a doctor regarding his/her HIV test, CD4 count and viral load results
- With your permission, the Federal Ministry of Health will use your child's leftover blood sample for future unspecified test results that may be important towards improving health of Nigerian children.

[IF 15-17 YEARS]:

- A trained lab technician will take about 14 mL (about one tablespoon) of blood from your child's arm or a few drops of blood from your child's finger.
- We will discuss the results with you. We can discuss the results with you and your child together, if you so choose.
- If your child is HIV positive, we will test his/her blood for CD4 cells count here at home. We will send his/her blood to a laboratory to determine the viral load. The results will be returned to the clinic or hospital you would like in 10-12 weeks. We will give you a referral form so you and your child can consult with a doctor regarding his/her HIV test, CD4 count and viral load results
- If your child is HIV positive, he/she will also get a Hepatitis B and C test. If your child tests positive for Hepatitis B or C, we will give you a referral form so you and your child can consult with a doctor regarding his/her test results.
- If your child is HIV negative, he/she may be randomly selected for CD4 testing and for Hepatitis B and C testing. If we have test results that might guide your child's care or treatment, we will give you a referral form so you and your child can consult with a doctor regarding his/her test results.
- With your permission, the Federal Ministry of Health will use your child's leftover blood sample for future unspecified test results that may be important towards improving health of Nigerian children.

→ GO TO STORAGE OF SPECIMENS**[IF PARENT/GUARDIAN HAS NOT BEEN THROUGH CONSENT PROCESS FOR INTERVIEW/BLOOD DRAW]**

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Purpose of survey

This survey will help us know how many people in Nigeria have HIV and need health services. It will also tell us about people's risk for getting HIV.

We plan to invite about 31,000 children to take part in this survey. If you give permission for your child to take part, you will help the Government of Nigeria make health services better in the country.

Survey Procedures

If you agree to allow us to invite your child to take part in the survey, we will ask your child to do an interview with us in private to learn what your child knows about HIV and about your child's behaviors that may put him or her at risk for HIV. The interview will take about 40 minutes. We will not share your child's answers to the interview questions with you. The interview will take place in private here in your house or an area around your house.

[IF 10-14 YEARS]: If you and your child agree, a trained laboratory person will take a small amount or about 6 mL (about 1 teaspoon) of blood from your child's arm to perform an HIV test here in your home. If it is not possible to take blood from your child's arm, then we will try to take a few drops of blood from your child's finger. We will give you the results today and discuss with you how to share the results with your child if you decide to share them with him/her. If you would like, we can discuss the test results together with your child. The entire testing and advice session will take about 40 minutes.

If your child tests positive for HIV, we will test his/her blood for CD4 cells count here at home and send his/her blood to a laboratory to test the viral load in his/her blood. CD4 cells are the part of your immune system that fights HIV infection and other diseases while viral load is the amount of HIV in the blood. We will also test the CD4 level of some children without HIV. If you provide us with the name of a health facility, we can send your child's viral load results there about 8 to 10 weeks from now. We will give you a referral form and information so that you and your child can consult with a doctor or nurse to learn more about his/her HIV test, CD4 count, viral load, and health.

We will also do other additional tests related to HIV. If we have test results that might help your child's care or treatment, we will contact you to tell you how you and your child's doctor or nurse may get these results.

With your permission, the Federal Ministry of Health will use your child's leftover blood sample for future unspecified test results that may be important towards improving health of Nigerian children.

[IF 15-17 YEARS]: If you and your child agree, a trained laboratory personnel will take a small amount or about 14 mL (about one tablespoon) of blood from your child's arm to perform an HIV test here in your home. If it is not possible to take blood from your child's arm, then we will try to take a few drops of blood from your child's finger. We will give you the results today and discuss with you how to share the results with your child if you decide to share them with him/her. If you would like, we can discuss the test results together with your child. The entire testing and advice session will take about 40 minutes.

If your child tests positive for HIV, we will test his/her blood for CD4 cells count here at home and send his/her blood to a laboratory to test the viral load in his/her blood. CD4 cells are the part of your immune system that fights HIV infection and other diseases while viral load is the amount of HIV in the blood. We will also test the CD4 level of some children without HIV. If you provide us with the name of a health facility, we can send your child's viral load results there about 8 to 10 weeks from now. We will give you a referral form and information so that you and your child can consult with a doctor or nurse to learn more about his/her HIV test, CD4 count, viral load, and health.

If your child tests positive for HIV, we will test his/her blood for Hepatitis B and C. If your child test positive for Hepatitis B and/or C, we will give you a referral form and information so that you and your child can consult with a

doctor or nurse to learn more about his/her Hepatitis and health.

If your child is HIV negative, he/she may be randomly selected for CD4 testing and for Hepatitis B and C testing. If we have test results that might guide your child's care or treatment, we will give you a referral form so you and your child can consult with a doctor regarding his/her test results.

We will also do other additional tests related to HIV. If we have test results that might help your child's care or treatment, we will contact you to tell you how you and your child's doctor or nurse may get these results.

With your permission, the Federal Ministry of Health will use your child's leftover blood sample for future unspecified test results that may be important towards improving health of Nigerian children.

Storage of specimens

We would like to ask for your permission to store your child's leftover blood for future tests. These tests may be about HIV or other health issues important for the health of Nigerian people such as nutrition or immunization. This sample can be stored for at least five years, but your child's name will be linked to the sample for five years. We will attempt to tell you about any test results during the five-year period that are important for your child's health. Your child's leftover blood will not be sold or used for profit making. If you do not agree to long-term storage of your child's blood samples, we will destroy your child's blood samples after all tests for this survey are completed.

Potential Risks

Your child may feel uncomfortable answering some of the questions. Your child does not need to answer any question(s) if they feel the question(s) makes them feel uncomfortable.

The risks to being in the survey and drawing blood are small. They include brief pain from the needle stick, bruising, lightheadedness, bleeding, and rarely, infection where the needle enters the skin. We will do everything we can to minimize these risks and keep your child's information private.

Potential Benefits

There may be no direct benefit to your child for taking part in the interview. The main benefit for your child is the chance to learn more about his/her health today. Some children who take part will be found to have HIV. If this happens to your child, the benefit is that you will learn his/her HIV status and will learn where to take your child for free HIV treatment that is given by the Federal Ministry of Health. If you already know that your child has HIV and he/she is taking drugs for HIV, the CD4 and viral load tests can help your child's doctor or nurse to know how well the drugs are working. Your child's taking part in this research could help us learn more about children and HIV in Nigeria and how HIV prevention and treatment programs are working.

Alternative to Taking Part in the Survey

Your alternative is not to let your child take part in this survey. If you choose not to let him/her take part, the services you all receive will not be affected in any way.

Costs to Person Taking Part in the Survey

There is no cost to you for your child being in the survey.

Payment to Person Taking Part in the Survey

You should also know that you and your child will not be paid for your child to be in the survey.

Confidentiality and Access to Your Child's Health Information

We will do everything we can to keep information about your child's secret. The information we collect from your child will be identified by a number and not by your name or your child's name. Your name and your child's name will not appear when we share survey results. The information we collect from your child will not be released outside of the study partners listed below unless there is an issue of safety.

[INTERVIEWER: DO NOT READ ALOUD]

The following individuals and/or agencies may look at your child's research records to make sure that we are protecting your child's rights as he/she takes part in the survey:

- Staff members from the Nigerian National Health Research Ethics Committees (NHREC) and the Institutional Review Boards at the Centers for Disease Control and Prevention (CDC; Atlanta, USA)
- The United States Office of Human Research Protections and other government agencies that look at the safety of persons taking part in research to ensure we are protecting your child's rights as a person who takes part in this survey
- Study staff and study monitors

[INTERVIEWER: READ FROM HERE]

Your permission to allow us to use and share your child's name and contact information with the groups above will expire two years after the end of the survey. If you want your child to leave the study, have any questions about the survey, or feel that your child has been harmed by taking part, you should contact NHREC at:

[INDICATE ADDRESS OF POC]

Address:

Federal Ministry of Health,
Federal Secretariat Complex Shehu Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

Refusal to Take Part and Right to Withdraw

It is your decision about whether you will allow us to invite your child to take part in the survey. Your child may stop taking part at any time. [ONLY IF CONDUCTING ADOLESCENT QUESTIONNAIRE] If your child does not want to answer some of the questions, she/he may skip them and move to the next question. If you agree to allow us to invite your child to take part, you will have the option for your child to test for HIV and CD4 counts and the option to have his/her blood stored for future research. If your child does not take part, it will not affect your child's health care in any way. If you decide to take your child out of the survey, we will request you to complete a refusal/withdrawal form and the samples you gave will not be included in analysis. If you have any questions about the survey, or feel that your child has been harmed by taking part, you should contact the responsible investigator:

[INDICATE ADDRESS OF POC]

Dr. Evelyn Ngige
Address: Federal Ministry of Health
Phone: +234-803-303-8090
Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
Address: US CDC Nigeria Office
Phone: +234-806-051-0525
Email: idalhatu@cdc.gov

Do you want to ask me anything about your child's participation in the survey?

Permission Statement

I have read this form, and/or someone has read it to me. I was encouraged to ask questions and given time to ask

questions. Any questions I had have been answered satisfactorily. I agree for my child to take part in this survey. I know that after allowing my child to take part, I may change my mind and withdraw him/her from taking part in this survey at any time.

I agree to allow you to ask my child to be in this survey. I know that after allowing my child to decide whether he/she wants to be in this survey, he/she may withdraw at any time. His/her taking part is voluntary. I have been offered a copy of this permission form.

1. Do you agree for us to ask your child to do the interview? 'YES' means that you give your permission to have the survey staff ask your child to do the interview. 'NO' means that you do NOT give permission for us to ask your child to be interviewed.

Yes No

2. Do you agree for us to ask your child to give blood for HIV testing, Hepatitis B and C and related testing? 'YES' means that you give your permission for us to ask your child to have the laboratorian collect a sample of your child's blood for HIV testing and related testing. 'NO' means that we will NOT ask your child to give blood for HIV testing and related testing.

Yes No

(if "Yes" proceed to the next question)

3. Do you agree for us to ask your child to have your child's leftover blood stored for future research? 'YES' means that you give permission for us to ask your child to store your child's blood samples for future research. 'NO' means that you do NOT give us permission to ask your child to store his/her blood samples for future research.

Yes No

4. Do you agree to be contacted should these future studies have clinically actionable results that are related to your child's health? 'YES' means that you agree to be contacted. 'NO' means that you don't agree to be contacted.

Yes No

Parent/guardian signature or mark _____ Date: ___/___/___

Printed name of parent/guardian _____

Parent/guardian ID number _____ (If applicable. If not applicable check here)

[For illiterate participants]

Signature of witness _____ Date: ___/___/___

Printed name of witness _____

Signature of person obtaining permission _____ Date: ___/___/___

Printed name of person obtaining permission _____

Survey staff ID number _____

Child's name (print) _____

Child's participant ID number _____

Appendix H5: Survey Assent for Interview and Blood Draw
[Ages 15-17 years]

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Hello. My name is_____ . I would like to invite you to take part in a survey of Nigerians to learn more about HIV in the country. The Federal Ministry of Health and the National Agency for the Control of AIDS (NACA) are leading this survey. They are doing it with the United States Centers for Disease Control and Prevention (CDC). You are invited to take part in this survey because you are a member of a household. Taking part in this survey is voluntary.

Purpose of the survey

This survey will help us know how many people in Nigeria have HIV and need health services. It will also tell us about people's risk for getting HIV.

We plan to ask over 31,000 young persons some of them aged 15-17 years like you and live in a household to join this survey. A survey is a way to learn new information about something by asking questions and testing many people.

We would like to invite you to join this survey. Your parent/guardian said it was okay for us to ask you to join the survey. This form might have some words in it that are not familiar to you. Please ask us to explain anything that you do not understand.

Survey Procedures

If you take part in this survey, you will be invited to take part in a single person interview. We will ask you questions about yourself, your sexual and social life and your awareness of HIV services. We will also ask for your permission to do a free HIV test on you. The interview will take about 40 minutes.

The information is collected on this tablet. The information is stored securely and can only be accessed by selected survey staff. The interview will take place in private here in your house or an area around your house.

After the interview, we will offer you HIV testing and may also offer Hepatitis B and Hepatitis C testing. We will also ask your permission to use your blood later in the laboratory for future testing.

Blood draw and HIV testing procedures

If you agree to take the HIV test, trained laboratory personnel will take a small amount, about 14 mL or one tablespoon of blood from your arm. If it is not possible to take blood from your arm, then we will try to take a few drops of blood from your finger. We will give your parent or guardian the HIV results today and offer counselling services. The testing and counselling session will take about 40 minutes.

If we find HIV in your blood, you will get a Hepatitis B and C test here at home. We will also test your blood for CD4 cells here at home. CD4 cells show how well your body can fight HIV infection and other diseases. We will also test the CD4 cells of some people who do not have HIV in their blood. We will also send your blood to a laboratory to find out your viral load which is the amount of HIV in your blood. We will send your viral load results to a health facility in about 8-10 weeks from now. We will give your parent or guardian a referral form and information so that you and

your parent or guardian can consult a nurse or doctor to learn more about your HIV, CD4 cells, viral load test results, and your health.

We will also do other additional tests related to HIV. Some HIV-negative people may also be randomly selected for Hepatitis B and Hepatitis C testing.

If we have test results that might help your care or treatment, we will contact your parent or guardian to tell you how you and your doctor or nurse may get these results.

Storage of specimens

We would also like your permission to keep your leftover blood sample for future research tests. These tests may be about HIV or other health issues important for the health of Nigerian people, such as nutrition or immunization. This will help the Federal Ministry of Health improve the health of the people of Nigeria. This sample can be kept for at least five years and your name will be linked to the sample for the five years. We will attempt to tell you about any test results during the five-year period that are important to your health. Your leftover blood will not be sold or used for profit making. If you do not agree for us to keep your blood sample, we will destroy your blood sample after all tests for this survey are completed.

Potential Risks/Discomfort

Some of the questions may make you feel uncomfortable. You are free to skip a question and continue. The information you provided will be protected in a secure place.

The risks in drawing blood are very small. They include brief pain from the needle stick, bruising, lightheadedness, bleeding, and rarely, infection where the needle enters the skin. If you have any discomfort, bleeding or swelling at the site, please let us know.

You may learn that you are infected with HIV. Learning that you have HIV may cause some emotional discomfort. You will receive advice on how to cope with learning that you have HIV.

If you are selected for Hepatitis B and C testing, you will learn your Hepatitis B and C status. This may cause some emotional discomfort. You will receive advice on how to cope and where to go for treatment.

We will do everything we can to keep the information on your HIV status a secret. Access to the information will be minimized and limited to persons carrying out this survey.

Potential Benefits

You may or may not benefit by taking part in this study. The answers you give will help Government to improve the health services of Nigerians and to develop more effective programs to fight HIV and reduce its spread in the community. The main benefit for you to take part in this survey is the chance to learn more about your health today. If we do not find HIV in your blood, you will learn about what you can do to stay away from HIV. If we find HIV in your blood the benefit is that you will know your HIV status and where to go for free life-saving treatment that is provided by the Federal Ministry of Health and the National Agency for the Control of AIDS (NACA). If you already know that you are HIV-positive and are on HIV treatment, the CD4 and viral load tests will help your nurse or doctor know how well your treatment is working.

Alternative to Taking Part in the Survey

Your alternative is to not take part. If you choose not to take part, the services you or any member of your household receive will not be affected.

Costs to Person Taking Part in the Survey

There is no cost to you or to your parent/guardian if you take part in this survey.

Payment to Person Taking Part in the Survey

You should also know that you and your parent/guardian will not be paid to be in the survey.

Confidentiality and Access to Your Health Information

What we talk about will be kept secret and will not be shown to anyone outside of the survey team. Your answers to the questions will be identified only by a number. Your name will not appear when we share survey results. You can choose to tell your parent/guardian about the interview. However, we will not tell your answers to your parent or guardian. The information we collect during the survey will not be released outside of the survey groups listed below unless there is an issue of safety.

[INTERVIEWER: DO NOT READ ALOUD]

The following persons and/or agencies may look at your research records to make sure that we are protecting your rights as he/she takes part in the survey:

- Staff members from the Nigerian National Health Research Ethics Committees (NHREC) and the Institutional Review Boards at the Centers for Disease Control and Prevention (CDC; Atlanta, USA).
- The United States Office of Human Research Protections and other government agencies that look at the safety of persons taking part in research to ensure we are protecting your rights as a person who takes part in this survey.
- Study staff and study monitors.

[INTERVIEWER: READ FROM HERE]

If you want to leave the study, have any questions about the survey, or feel that you have been harmed by taking part, you should contact the NHREC at:

[INDICATE ADDRESS OF POC]

Address:

Federal Ministry of Health,
Federal Secretariat Complex Shehu
Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

[READ FROM HERE]

Refusal to Take Part and Right to Withdraw

You do not have to take part in the survey. Even If you choose to join the survey, you may change your mind at any time and stop taking part. If you decide not to take part, it will not affect your health care in any way. Your permission to allow us to use and share your information with the groups above will expire two years after the end of the survey. If you want to leave the survey, have any questions about the survey, or feel that you have been harmed by taking part, you should contact the responsible investigator:

[INDICATE ADDRESS OF POC]

Dr. Evelyn Ngige
Address: Federal Ministry of Health
Phone: +234-803-303-8090
Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
Address: US CDC Nigeria Office
Phone: +234-806-051-0525
Email: idalhatu@cdc.gov

Do you want to ask me anything about the survey?**Assent statement**

I have read this form, and/or someone has read it to me. I was encouraged to ask questions and given time to ask questions. Any questions that I had were answered satisfactorily. I agree to be in this survey. I know that after choosing to be in this survey, I may withdraw at any time. My taking part is voluntary. I have been offered a copy of this assent form.

1. Do you agree to do the interview? 'YES' means that you agree to do the interview. 'NO' means that you will NOT do the interview.

Yes No

2. Do you agree to have your blood tested for HIV Testing, Hepatitis B and C, and other related testing during this survey? 'YES' means that you agree to give blood for Hepatitis B and Hepatitis C testing. 'NO' means that you will NOT give blood for HIV and other related testing

Yes No

3. Do you agree to have your leftover blood stored for future research? 'YES' means that you agree to have these blood samples stored for future testing. 'NO' means that these blood samples will NOT be stored for future research.

Yes No

4. Do you agree to be contacted should these future studies have clinically actionable results that are related to your health? 'YES' means that you agree to be contacted. 'NO' means that you don't agree to be contacted.

Yes No

Participant signature or mark _____ Date: ___/___/___

Printed name of participant _____

Participant ID number _____

Printed name of parent/guardian _____

[For illiterate child]

Signature of witness _____ Date: ___/___/___

Printed name of witness _____

Signature of person obtaining assent _____ Date: ___/___/___

Printed name of person obtaining assent _____

Survey staff ID number _____

Appendix H6: Survey Assent for Adolescent Interview and Blood Draw
[Ages 10-14 years]

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Hello. My name is_____ . I would like to invite you to take part in a survey of Nigerians to learn more about HIV in the country. The Federal Ministry of Health and the National Agency for the Control of AIDS (NACA) are leading this survey. They are doing it with the United States Centers for Disease Control and Prevention (CDC). You are invited to take part in this survey because you are a member of a household. Taking part in this survey is voluntary.

Purpose of the survey

This survey will help us know how many people in Nigeria have HIV and need health services. It will also tell us about people's risk for getting HIV.

We plan to ask over 31,000 young persons, some of them aged 10-14 years like you and live in a household, to join this survey. A survey is a way to learn new information about something by asking questions and testing many people.

We would like to invite you to join this survey. Your parent/guardian said it was okay for us to ask you to join the survey. This form might have some words in it that are not familiar to you. Please ask us to explain anything that you do not understand.

Survey Procedures

If you take part in this survey, you will be invited to take part in a single person interview. We will ask you questions about yourself, your sexual and social life and your awareness of HIV. We will also ask for your permission to do free HIV test on you. The interview will take about 40 minutes.

The information is collected on this tablet. The information is stored securely and can only be accessed by selected survey staff. The interview will take place in private here in your house or an area around your house.

Blood draw and HIV testing procedures

If you agree to take the HIV test, trained laboratory personnel will take a small amount, about 6 mL or 1 teaspoons of blood from your arm. If it is not possible to take blood from your arm, then we will try to take a few drops of blood from your finger. We will give your parent or guardian the HIV results today and offer counselling services. The testing and counselling session will take about 40 minutes.

If we find HIV in your blood, will also test your blood for CD4 cells count here at home. CD4 cells shows how well your body can fight HIV infection and other diseases. We will also test the CD4 of some people who do not have HIV in their blood. We will also send your blood to a laboratory to find out your viral load which is the amount of HIV in your blood. We will send your viral load results to a health facility in about 10-12 weeks from now. We will give your parent or guradian a referral form and information so that they can consult a nurse or doctor to learn more about your HIV, CD4 cells, viral load test results, and your health.

If we have test results that might help your care or treatment, we will contact your parent or guardian to tell them how to get the results.

Storage of specimens

We would also like your permission to keep your leftover blood sample for future research tests. These tests may be about HIV or other health issues important for the health of Nigerian people, such as nutrition or immunization. This will help the Ministry of Health improve the health of the people of Nigeria. This sample can be kept for at least five years and your name will be linked to the sample for the five years. We will attempt to tell you about any test results during the five-year period that are important to your health. Your leftover blood will not be sold or used for profit making. If you do not agree for us to keep your blood sample, we will destroy your blood sample after all tests for this survey are completed.

Potential Risks and benefits

Some of the questions may make you feel uncomfortable. You are free to skip a question and continue. The information you provided will be protected in a secure place.

The risks in drawing blood are very small. They include brief pain from the needle stick, bruising, lightheadedness, bleeding, and rarely, infection where the needle enters the skin. If you have any discomfort, bleeding or swelling at the site, please let us know.

We will do everything we can to keep the information on your HIV status a secret. Access to the information will be minimized and limited to persons carrying out this survey.

Alternative to Taking Part in the Survey

Your alternative is to not take part. If you choose not to take part, the services you or any member of your household receive will not be affected.

Costs to Person Taking Part in the Survey

There is no cost to you or to your parent/guardian if you take part in this survey.

Payment to Person Taking Part in the Survey

You should also know that you and your parent/guardian would not be paid to be in the survey.

Confidentiality and Access to Your Health Information

What we talk about will be kept secret and will not be shown to anyone outside of the survey team. Your answers to the questions will be identified only by a number. Your name will not appear when we share survey results. You can choose to tell your parent/guardian about the interview. However, we will not tell your answers to your parent or guardian. The information we collect during the survey will not be released outside of the survey groups listed below unless there is an issue of safety.

[INTERVIEWER: DO NOT READ ALOUD]

The following persons and/or agencies may look at your research records to make sure that we are protecting your rights as he/she takes part in the survey:

- Staff members from the Nigerian National Health Research Ethics Committees (NHREC) and the Institutional Review Boards at the Centers for Disease Control and Prevention (CDC; Atlanta, USA).
- The U.S. Office of Human Research Protections and other government agencies that look at the safety of persons taking part in research to ensure we are protecting your rights as a person who takes part in this survey.
- Study staff and study monitors.

[INTERVIEWER: READ FROM HERE]

If you want to leave the study, have any questions about the survey, or feel that you have been harmed by taking part, you should contact the NHREC at:

[INDICATE ADDRESS OF POC]

Address:

Federal Ministry of Health,
Federal Secretariat Complex Shehu
Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

[READ FROM HERE]

Refusal to Take Part and Right to Withdraw

You do not have to take part in the survey. Even If you choose to join the survey, you may change your mind at any time and stop taking part. If you decide not to take part, it will not affect your healthcare in any way. Your permission to allow us to use and share your information with the groups above will expire two years after the end of the survey. If you want to leave the survey, have any questions about the survey, or feel that you have been harmed by taking part, you should contact the responsible investigator:

[INDICATE ADDRESS OF POC]

Dr. Evelyn Ngige
Address: Federal Ministry of Health
Phone: +234-803-303-8090
Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
Address: US CDC Nigeria Office
Phone: +234-806-051-0525
Email: idalhatu@cdc.gov

Do you want to ask me anything about the survey?

Assent statement

I have read this form, and/or someone has read it to me. I was encouraged to ask questions and given time to ask questions. Any questions that I had were answered satisfactorily. I agree to be in this survey. I know that after choosing to be in this survey, I may withdraw at any time. My participation is voluntary. I have been offered a copy of this assent form.

1. Do you agree to do the interview? 'YES' means that you agree to do the interview. 'NO' means that you will NOT do the interview.

Yes No

2. Do you agree to have your blood tested for HIV Testing and other related testing during this survey? 'YES' means that you agree to give blood for HIV testing. 'NO' means that you will NOT give blood for HIV testing

Yes No

3. Do you agree to have your leftover blood stored for future research? 'YES' means that you agree to have these blood samples stored for future testing. 'NO' means that these blood samples will NOT be stored for future research.

Yes No

4. Do you agree to be contacted should these future studies have clinically actionable results that are related to your health? 'YES' means that you agree to be contacted. 'NO' means that you don't agree to be contacted.

Yes No

Participant signature or mark _____ Date: ___/___/___

Printed name of participant _____

Participant ID number _____

Printed name of parent/guardian _____

[For illiterate child]

Signature of witness _____ Date: ___/___/___

Printed name of witness _____

Signature of person obtaining assent _____ Date: ___/___/___

Printed name of person obtaining assent _____

Survey staff ID number _____

Appendix H7: Consent to Share Contact Information for Active Linkage to Care of Participants and Parents of Minors 0-14 years

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Purpose of consent

Your child had a positive HIV test today. We have provided you with a referral form that you and your child can take to a health clinic to seek HIV treatment and care. We would like to help you and your child in accessing the health care that your child needs. If you agree, we will provide your contact information and your child's HIV results to health workers or counselors from a trained social service organization. This counselor will contact you to talk to you and your child about HIV and help you and your child go for HIV care. Anyone who is provided with you and your child's details will be experienced in providing support to people living with HIV and will be trained in maintaining confidentiality.

What do you have to do if you agree to take part?

If you agree for your child's information to be shared, and to be contacted, we will provide your name, phone number (if you provided it to us) and your address to those counselors to provide you with support. The counselor can contact you by short message service (SMS), by phone, or in person.

What are the potential risks?

As with all surveys, there is a chance that confidentiality could be compromised. We are doing everything we can to minimize this risk.

What are the potential benefits?

A counselor will assist you in accessing the health care needed by your child.

What about confidentiality?

Your child's HIV test results and your child's contact information will not be shared with any other parties aside from what was specified in the other consent forms, and with this support organization. They will also do their utmost to maintain your child's confidentiality. However, we cannot guarantee complete confidentiality.

Who should you contact if you have questions?

If you change your mind or have any questions or feel that your child has been harmed by taking part, you should contact the Investigator listed below:

Dr. Evelyn Ngige
 Address: Federal Ministry of Health
 Phone: +234-803-303-8090
 Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
 Address: US CDC Nigeria Office
 Phone: +234-806-051-0525
 Email: idalhatu@cdc.gov

If you decide your child should leave the study, no more information will be collected from you. However, we will not be able to take back the information that has already been collected and shared.

If you have any questions about your child's rights as a person in this survey, you can contact:

National Health Research Ethics Committee of Nigeria
Address: Federal Ministry of Health, Federal Secretariat Complex, Abuja
Tel: +234-803-586-8293

Do you want to ask me anything about the survey?

Consent Statement

Any questions that I had were answered satisfactorily. I have been offered a copy of this consent form.

1. Do you agree to allow us to share your contact information with the State Ministry of Health or a partner that Ministry of Health works with, who may contact you to assist and support you and your child in seeking HIV care? 'YES' means that you agree for your information to be shared. 'NO' means that you do not agree for your information to be shared.

Yes No

2. If yes, do you agree to be contacted by?

SMS Yes No

Phone call Yes No

In person Yes No

Parent/guardian signature or mark _____ Date: ___/___/___

Printed name of parent/guardian _____

Participant ID number _____

Signature of person obtaining consent _____ Date: ___/___/___

Printed name of person obtaining consent _____

Survey staff ID number _____

**Appendix H8: Consent to Share Contact Information for Active Linkage to Care
(Participants 18-64 Years)**

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Purpose of consent

You had a positive HIV and/or Hepatitis B or Hepatitis C test today. We have provided you with a referral form to bring to a health clinic and seek HIV treatment and/or Hepatitis B or Hepatitis C care. We would like to help you in accessing the health care that you need. If you agree, we may be able to provide your contact information and HIV and or Hepatitis B or C test results to healthcare workers from the State Ministry of Health (SMOH) or to a partner that the SMOH work with. This healthcare worker will contact you to talk to you about HIV and or Hepatitis B or C and help you go for appropriate treatment and care. Anyone who is provided with your details will be experienced in providing support to people living with HIV and or Hepatitis B or Hepatitis C infection and will be trained in maintaining confidentiality.

What do you have to do if you agree to take part?

If you agree for your information to be shared and to be contacted, we will provide your name, phone number (if you provided it to us) and your address to those health care providers to provide you with support. The health care worker can contact you by short message service (SMS), by phone or in person based on your preference.

What about confidentiality?

Your HIV and or Hepatitis B or C test results and your contact information will not be shared with any other parties aside from what was specified in the other consent forms, and with this support organization. They will also do their utmost to maintain your confidentiality. However, we cannot guarantee complete confidentiality.

What are the potential risks?

As with all surveys, there is a chance that confidentiality could be compromised. We are doing everything we can to minimize this risk.

What are the potential benefits?

A healthcare worker will assist you in accessing the health care that you need.

Who should you contact if you have questions?

If you change your mind or have any questions or feel that you have been harmed by taking part, you should contact any of the Principal Investigators listed below:

Dr. Evelyn Ngige

Address: Federal Ministry of Health

Phone: +234-803-303-8090

Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu

Address: US CDC Nigeria Office

Phone: +234-806-051-0525

Email: idalhatu@cdc.gov

You may also wish to contact the Nigerian National Health Research Ethics Committee (NHREC) if you feel your rights have been violated in this study:

Address:
Federal Ministry of Health,
Federal Secretariat Complex Shehu Shagari Way,
Garki, Abuja
P.M.B. 083 Garki Abuja
Tel: +234-803-586-8293
E-mail: info@nhrec.net

Consent Statement

Any questions that I had were answered satisfactorily. I have been offered a copy of this consent form.

If you agree to allow us to share your contact information with the SMOH or a partner that the SMOH works with who can help you go to a clinic to receive HIV treatment, care and support, please state the following:

"I agree to allow my contact information to be shared with the SMOH or a partner that the SMOH/ works with, to help me go to a clinic to receive HIV treatment and/or HBV, HCV, care and support"

_____ Check this box if participant AGREES to have their contact information shared with SMOH or their partner

If you DO NOT agree to allow us to share your contact information with SMOH or a partner that SMOH works with who can help you go to a clinic to receive treatment, care and support, please state the following:

"I DO NOT agree to allow my contact information to be shared with the SMOH or a partner that the SMOH works with, to help me go to a clinic to receive HIV treatment, and/or Hepatitis B or Hepatitis C infection care and support"

_____ Check this box if participant DOES NOT AGREE to have their contact information shared with SMOH or their partner

1. If yes, do you agree to be contacted by?

SMS _____ Yes _____ No

Phone call _____ Yes _____ No

In person _____ Yes _____ No

Participant ID number _____

Signature of person obtaining consent _____ Date: ____/____/____

Printed name of person obtaining consent _____

Survey staff ID number _____

**Appendix H9: Parent/Guardian Consent to Share Contact Information for Active Linkage
(Children 15-17 years)**

Interviewer reads: What language do you prefer for our discussion today?

- English
- Hausa
- Igbo
- Yoruba

Nigeria AIDS Indicator and Impact Survey (NAIIS)

Purpose of consent

Your child had a positive HIV and/or Hepatitis B or Hepatitis C test today. We have provided you with a referral form so that you and your child can take to a health clinic and seek HIV treatment and care or Hepatitis B or C care. We would like to help you and your child in accessing the health care that your child needs. If you agree, we might be able to provide your contact information and your child's HIV results and/or Hepatitis B or C to healthcare workers from the State Ministry of Health (SMOH) or a partner that the SMOH works with. This counselor will contact you to talk to you and your child about HIV and help you and your child go for HIV care. Anyone who is provided with you and your child's details will be experienced in providing support to people living with HIV and or Hepatitis B or Hepatitis C infection and will be trained in maintaining confidentiality.

What do you have to do if you agree to take part?

If you agree for your child's information to be shared, and to be contacted, we will provide your name, phone number (if you provided it to us) and your address to those health care workers to provide you with support. The health care worker can contact you by short message service (SMS), by phone or in person based on your preference.

What about confidentiality?

Your HIV, Hepatitis B, or Hepatitis C test results and your contact information will not be shared with any other parties aside from what was specified in the other consent forms, and with this support organization. They will also do their utmost to maintain your confidentiality. However, we cannot guarantee complete confidentiality.

What are the potential risks?

As with all surveys, there is a chance that confidentiality could be compromised. We are doing everything we can to minimize this risk.

What are the potential benefits?

A healthcare worker will assist you in accessing the health care needed by your child.

Who should you contact if you have questions?

If you change your mind or have any questions or feel that you have been harmed by taking part, you should contact any of the Principal Investigators listed below:

Dr. Evelyn Ngige
Address: Federal Ministry of Health
Phone: +234-803-303-8090
Email: nkadingige@yahoo.com

Dr. Ibrahim Dalhatu
Address: US CDC Nigeria Office
Phone: +234-806-051-0525
Email: idalhatu@cdc.gov

You may also wish to contact the Nigerian National Health Research Ethics Committee (NHREC) if you feel your rights have been violated in this study:

Address:
 Federal Ministry of Health,
 Federal Secretariat Complex Shehu
 Shagari Way,
 Garki, Abuja
 P.M.B. 083 Garki Abuja
 Tel: +234-803-586-8293
 E-mail: info@nhrec.net

Consent Statement

Any questions that I had were answered satisfactorily. I have been offered a copy of this consent form.

If you agree to allow us to share your child's contact information with SMOH or a partner that SMOH work with who can help you and your child go to a clinic to receive HIV treatment, and/or Hepatitis B or Hepatitis C infection care and support, please state the following:

"I agree to allow my child's contact information to be shared with the staff of SMOH or a partner that the SMOH work with, to help me and my child go to a clinic to receive HIV treatment, and/or Hepatitis B or C care and support"

_____ Check this box if participant AGREES to have their child's contact information shared with SMOH or their partner

If you DO NOT agree to allow us to share your child's contact information with SMOH a partner that the SMOH works with who can help you and your child go to a clinic to receive treatment, care and support, please state the following:

"I DO NOT agree to allow my child's contact information to be shared with the SMOH or a partner that the SMOH works with, to help me and my child go to a clinic to receive HIV treatment, and/or Hepatitis B or Hepatitis C infection care and support"

_____ Check this box if participant DOES NOT AGREE to have their child's contact information shared with MOH/ the MOHC/GECC or their partner

1. If yes, do you agree to be contacted by?

SMS _____ Yes _____ No

Phone call _____ Yes _____ No

In person _____ Yes _____ No

Parent/guardian's Participant ID number _____

Child's Participant ID number _____

Signature of person obtaining consent _____ Date: ____/____/____

Printed name of person obtaining consent _____

Survey staff ID number _____