Scenarios for Nigeria modeling

Scenario 1 is business as usual

**What I did:** Kept all interventions at the same coverage level

For scenario 2, there are multiple coverage levels you could look at:

2a) High effective coverage across all core interventions (80%)

**What I did:**

* Case management: Applied some scale factors to individual coverage levels to gradually increase it up to 80% over 12-intervention scale-up “rounds”
* ITN: Increased all coverages to from baseline 80% where < 80% (final ITN files pending killing and blocking from aadrita)
* SMC: Kept high access group at 100% and low access group at 80%

1. Increase from baseline levels of 10%, 20%, 30% for all interventions except SMC and IRS where all targeted areas would be expected to achieve 80% or higher coverage each cycle.

**2b) Increase from baseline by 10%**

**What I did**

* Case management: Increased baseline coverage by 10% up to 100%
* ITN: Increased all baseline coverages by 10% up to 100%
* SMC: reuse the same files from 80% scenario

**2c) Increase from baseline by 20%**

**What I did**

* Case management: Increased baseline coverage by 20% up to 100%
* ITN: Increased all baseline coverages by 20% up to 100%
* SMC: reuse the same files from 80% scenario

**2d) Increase from baseline by 30%**

**What I did**

* Case management: Increased baseline coverage by 30% up to 100%
* ITN: Increased all baseline coverages by 30% up to 100%
* SMC: reuse the same files from 80% scenario

1. A trajectory that is more realistic, which you know when mass campaigns have happened and when the next ones will happen when PBO and other new nets could be introduced, and case management access will change at best at same rate as past NSP period.

Scenario 3 is the ‘funded’ scenario and includes funds from GF and other sources. Usually in GF funding requests, countries are required what will be funded by GF vs other donors

For scenario 3, budget includes 80% coverage of interventions when they are implemented (except for CM which will grow at the usual rate). So the main issue is getting the timing of the intervention correct. You should have data on when last campaigns happened per LGA, you know SMC period per LGA **but also aware that most of the funding for any new nets or additional SMC LGAs will be available as of 2021.**

**What I did**

**Scenario 3a and b (PAAR and no PAAR LGAs)**

* Case management: Used a simple linear model to estimate the change in coverage for increase in year by archetype. Used these fractions as scale values for yearly increases by LGA archetype.
* ITN: Increased ITN coverages to 80% with simulation starting in 2020
* SMC: Created one PAAR and none PAAR csv and used simulation day starting in 2020