



EXECUTIVE SUMMARY

Cross River State Agency for the Control of AIDS (CRSACA) has the mandate to coordinate and monitor the HIV and AIDS multi-sectoral response in the state. Having been transformed into an agency in May, 2007 with its Board of Directors inaugurated, the agency has been hampered from performing its statutory mandate of coordinating, mobilising resources, building capacity, monitoring and evaluating the multi-sectoral HIV and AIDS response due to the non-release of funds. With the recent increase of HIV prevalence from 6.1% to 8.0% which is above national and zonal average and the emergence of a new trend in the HIV infections from the hitherto low risk heterosexual group (which accounts for over 70% of new infections in the state) as revealed by the recent survey on Mode of Transmission (MOT) (2010-UNAID Model), it is obvious that the state is on the verge of experiencing a significant HIV and AIDS epidemic of inestimable magnitude. This scenario is compounded by the non-release of budgeted HIV and AIDS funds and donor dependency of the subsisting intervention programmes which are limited in scope and not sustainable. The funding gap of the state's HIV and AIDS response further raises the question of the commitment of the state towards the attainment of the relevant MDG and the declaration of universal access to HIV and AIDS service which the governor re-emphasised during the World AIDS Day in 2009.

To enable SACA achieve its mandate, there is need for the prompt release of HIV and AIDS funding to address the high HIV prevalence, management of new infection, and general scaling up and sustenance of the comprehensive HIV and AIDS interventions in the state.

In view of the above and particularly for SACA to facilitate the attainment of the vision of a HIV and AIDS-free state, this policy brief seeks to advocate for the timely release of the approved budgeted funds for the agency.

BACKGROUND OF THE PROBLEM

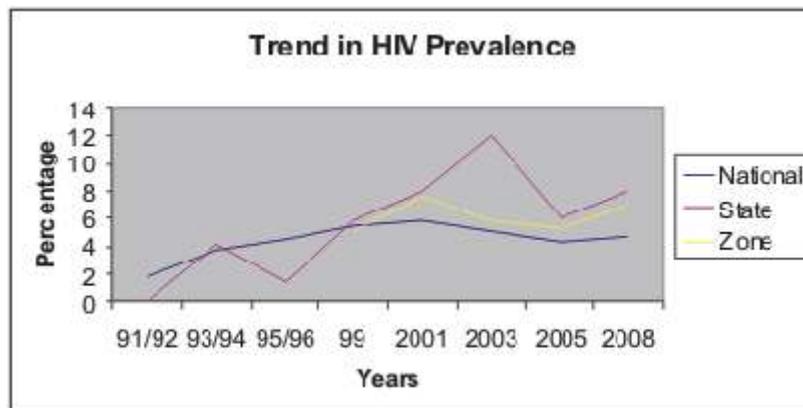
In recognition of the enormity of HIV and AIDS infection and the need to effectively address the issue through a multi-sectoral approach, the state government established the State Action Committee on AIDS (SACA) in 2002. This committee was later transformed into an agency in May 2007 with the passage of the agency bill and inauguration of the board of directors. The mandate of the agency is to coordinate, mobilise resources, build capacity, monitor and evaluate the multi-sectoral HIV and AIDS

response. This brought about an expanded and comprehensive response in the HIV and AIDS interventions. It also ensured that SACA became part of the planning and budget processes in the state.

In spite of these commendable efforts, it has been revealed that SACA is seriously constrained to fulfil its mandate due to non-release of HIV and AIDS budgetary allocation. For instance, in 2007 and 2008, SACA had an approved budgetary allocation of one hundred million naira (N100,000,000) for each year however, only ten million naira (N10,000,000) was released to cover the operational cost for each year. In 2009 also, the sum of three hundred and fifty million, five hundred and seventy-two thousand, three hundred and

seventy naira (N350,572,370) was approved for SACA in the state budget but only three million, eight hundred naira (3,800,000) was released as overhead cost. This represents 0.1% of the total approved budget for the year. With this level of funding, it will be difficult for SACA to achieve its mandate and realise the state's vision of a HIV and AIDS-free state.

The most recent sentinel survey carried out in 2008 shows that Cross River State has a prevalence of 8% which is an increase from the previous 6.1% prevalence of 2005. It is obvious that the state is experiencing a gradual increase in HIV new infections as reflected in the recent study on the Mode of Transmission (MOT) (2010-UNAID Model).



JUSTIFICATION/RATIONALE

The justification and need for the prompt release of budgeted HIV and AIDS funds of SACA has become very imperative to address the issues underlisted:

- The state HIV prevalence shows that the rate of infection is on the rise and presently far above the national and zonal average.
- Recent studies and surveys carried out reveals new infection trends coming from the hitherto low risk segment of the population that were not targeted for preventive services.
- Some development partners that have been supporting the state response like GHAIN, ICAP and CEDPA, are at the point of closing out. Consequently there is a wide gap in terms of sustainability of the HIV and AIDS programme.

The report of the in-depth assessment of Cross River state's HIV response by Strengthening Nigeria's Response (SNR) programme indicated that there are still gaps in community interventions.

CRSACA BUDGET 2007-2009

Year	Amount Budgeted	Amount Released	Percentage Released
2007	=N=100,000,000	=N=10,000,000	1%
2008	=N=100,000,000	=N=10,000,000	1%
2009	=N=350,572,370	=N=3,800,000	0.1%
2010	=N=205,353,910	*****	*****

IMPLICATIONS

The non-release of budgetary allocation of CRSACA is adversely affecting the state's response with intervention activities that are donor dependent as 80% of HIV and AIDS funding comes from development partners as indicated in the ENR assessment report of 2010 in seven states including Cross River using a budgetary allocation and analysis framework while the balance of 20% is from government. The implication for this is that HIV and AIDS response is not sustainable, as some development partners programmes have closed

down while others are no longer taking new clients on treatment programme as a result of donor fatigue. This funding gap limits the attainment of Millennium Development Goal (MDG) six as well as the Universal Access Declaration to HIV and AIDS services. Furthermore, the outcome of Mode of Transmission survey in the state shows that more than 70% of HIV new infections will emanate from low risk heterosexual and casual heterosexuals in the state if prevention intervention is not scaled-up.

EFFORTS DIRECTED TOWARDS RELEASE OF HIV & AIDS FUND

In the bid to ensure the timely release of funds, various efforts have been made in the past by SACA and other state level partners. Such efforts include:

- Development of State Government Action plans which is the condition precedence for the release of funds from the state government
- Advocacy to Cross River State House of Assembly's Committee on Health
- Advocacy to the budget office
- Several memos written to relevant government departments responsible for budgetary processes and fund release

SACA's performance in the health cluster (of which it is a member) is very low and this is attributed to non-release of funds. The chairman of the health clusters, who is also the Commissioner for Health, agreed to push the issue to the relevant authority.

