Kano State improved its ability to prevent, detect and respond to disease outbreaks by establishing a budget line for epidemic preparedness and response (EPR) after civil society organizations (CSOs) made the case for increased and sustained funding.

“Sustainable domestic financing is our defense against epidemics, not just an investment.”

Dr Abdullahi Isa Kauranmata, Kano State Epidemiologist

**The Challenge**

State level adaptation of the National Action Plan for Health Security and financing is needed across Nigeria’s 36 states to strengthen the country’s outbreak readiness. In Kano State, the most populated state in Nigeria and home to the second largest city after Lagos, outbreaks of cholera, diphtheria, measles and cerebrospinal meningitis, in addition to COVID-19, highlight the need for policies and funding to address recurring and emerging disease outbreaks.
**Case Study**

**Epidemic Preparedness in Nigeria**

**GHAI’s Response**

Starting in 2020, the Global Health Advocacy Incubator’s (GHAI’s) Prevent Epidemics program joined with local civil society partners, Nigeria Health Watch (NHW), the Legislative Initiative for Sustainable Development (LISDEL), and BudgIT, to build public and political support in Kano for epidemic preparedness. GHAI’s partners identified stakeholders who support epidemic preparedness as a critical public health priority in the state, initiated media advocacy to support EPR, and researched funding gaps and barriers to efficient budget execution.

**Coalition Building**

LISDEL and GHAI worked with civil society and key political decision-makers, including relevant government Ministries, Department, and Agencies, to form a coalition of advocates called the Kano State Health Security Advocacy Team (KHESAT). Through coordinated efforts with the KHESAT, GHAI and LISDEL engaged policymakers and other stakeholders at public forums, workshops and in-person meetings during the various stages of the budget process to emphasize the need to prioritize epidemic preparedness in the state budget. The KHESAT generated public interest and media coverage supportive of government efforts to fund EPR.

**Media Advocacy**

In addition to the KHESAT generating media coverage supportive of EPR funding, GHAI’s partners undertook a targeted media advocacy campaign that showcased citizens’ calls to action on epidemic preparedness and stakeholders’ commitments towards improved health security policy and financing in the state. Activities included using the hashtag, #PreventEpidemicsNaijia, developed by NHW, on social media and a 20-minute documentary on the importance of preventing epidemics. NHW also conducted a Journalism Master Class to build awareness about the need for EPR reporting, BudgIT developed jingles that were broadcast by local radio stations, and more.

**Establishment of an EPR Budget Line**

Following advocacy highlighting the need for epidemic preparedness, the Kano State government created a new budget line for EPR for fiscal year 2021 — the first of its kind in Nigeria — for 300 million naira (approximately US $660,000) and allocated an additional 250 million naira (approximately US $550,000) for the establishment of a Public Health Laboratory. The EPR budget line was increased and subsequently sustained at 400 million naira (approximately US $883,000) for fiscal years 2022 and 2023, respectively.

Kano also secured commitments for EPR budget allocations in each of the 44 local government areas (LGAs) in fiscal year 2021, with funding commitments increasing by 50 percent in fiscal year 2022, for a commitment of 3 million naira (approximately US$6,600) in 2022, up from 2 million naira (approximately US$4,400) in 2021, a total allocation of 132 million naira (approximately US$290,000) for EPR (see figure on page 3).

**Accountability and Sustainability**

GHAI and our partners continuously assess budget needs for the next budget cycle and...
supported government efforts to develop the Kano State Action Plan for Health Security, which was officially finalized and disseminated in February 2023. To build resilience and efficiency in the budget process, we sought to identify additional sources of funding and put in place mechanisms for the release of allocated funds by securing a Standing Order for the monthly disbursement of 3 million naira (approximately US$6,600) to the Ministry of Health for the implementation of EPR activities from the Kano State Health Trust Fund. The monthly transfers began in January 2023.

Furthermore, the KHESAT supports an ongoing effort by the State Government to update the Kano State Health Trust Fund Law to allow for the monthly disbursement of a percentage of the fund for EPR activities in the State. The KHESAT also conducts follow-up visits with stakeholders to ensure the sustainability of the funding gains, the prompt release of allocations and the efficient use of funds.

To sustain the gains achieved and encourage even greater public health security in Kano, the Africa CDC, e-Health Africa, GHAI, LISDEL, the FCDO-Lafiya Project and Resolve to Save Lives supported the Kano State Government to develop a public health security legal framework, called the Kano State Public Health Security Bill.
Results

Kano State established an EPR budget line that has been increased and sustained for a total of 2.162 billion naira (approximately US$4.76 million) for EPR in new funding over three years. A Health Security Accountability Framework is used by GHAI and our partners to track funding levels and identifying funding gaps. Budget accountability is improved by tracking the disbursement and monthly release of funds.

Lessons Learned

- Stakeholder mappings to identify relevant decision makers in government, development partners and civil society organizations help to target advocacy and build effective coalitions for epidemic preparedness investments.

- Identifying advocacy champions and using them as key influencers generates earned media and bolsters public awareness and support for the sustainability of funding.

- Evidence and data to support the investment case for epidemic preparedness is an effective strategy even when economic outlooks are tightening. Leadership by local civil society is critical to developing effective coalitions and advocacy campaigns.

- Advocacy does not end with line-item allocations but must be maintained throughout the fiscal year to ensure allocated funds are released and spent.

- Sustained advocacy can generate new and support long-term investments in health security beyond immediate crises.