

Assessing the Effect of the USAID’s Stop Work Order on Tuberculosis Programmes in FCT, Abuja, Nigeria: Challenges and Opportunities for Domestic Resources Mobilization

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ABSTRACT

Introduction: Tuberculosis (TB) remains a leading cause of infectious disease deaths worldwide, with Nigeria among the top ten high-burden countries. The 2025 USAID stop-work order on TB programmes disrupted interventions in 18 high-burden states, including the Federal Capital Territory (FCT), Abuja. This study assessed the effect of the suspension on TB control and explored options for sustainable domestic resource mobilization.

Methodology: The study employed a mixed approach focusing mainly on qualitative data collection and analysis. Qualitative data were gathered through key informant interviews and focus group discussions with FCT program managers, healthcare workers, and civil society representatives to explore perceptions of challenges and opportunities related to domestic financing of TB programs. Quantitative data was solely secondary data reviewed from the National TB program data report, focusing on the period before and after the USAID stop work order, looking into the case detection, treatment, and health workforce statistics.

Results: The findings showed a significant decline in case detection, treatment interruptions, and reduced diagnostic capacity. The layoff of 1,800 health workers and suspension of community screenings led to service gaps and increased risk of undetected cases. Nonetheless, opportunities exist to strengthen domestic financing through the Basic Health Care Provision Fund (BHCPF), the National Health Insurance Authority (NHIA) Act, and innovative taxes on alcohol and tobacco. Strengthening public-private partnerships and integrating TB services within primary healthcare also offer sustainable pathways.

Conclusion: The USAID stop-work order acted as a stress test for the TB control programme in the FCT, revealing a system heavily dependent on external funding and vulnerable to sudden disruptions. The study conclusively demonstrates that the funding suspension led to a catastrophic decline in case detection and treatment outcomes, exacerbated by a severe human resource crisis and breakdowns in the supply chain for diagnostics and drugs.

Keywords: Tuberculosis, USAID Stop-Work Order, Abuja, Domestic Financing, Donor Funding

