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Commentary on the Implementation Gap: Barriers to Lassa Fever Infection Prevention and Control in Edo State's Primary Healthcare Facilities

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| Abstract

Lassa fever is a persistent public health threat in Nigeria, with Edo State bearing a high burden. Primary healthcare facilities serve as the frontline defence, but a significant gap exists between formal infection prevention and control protocols and their real-world application. This commentary aims to identify and analyse the principal systemic and operational barriers that hinder the effective implementation of Lassa fever infection prevention and control measures in Edo State's primary healthcare facilities. The article is a narrative commentary that synthesises and critiques existing literature, official reports, and field observations from the region. Key insights: The analysis identifies chronic, interlinked barriers. A fundamental issue is the lack of dedicated, sustainable funding for infection prevention and control, resulting in severe shortages of personal protective equipment and unreliable water supply. This is compounded by inadequate training for healthcare workers, weak disease surveillance systems, and significant infrastructural deficits. The implementation gap for Lassa fever infection prevention and control in Edo State stems not from absent guidelines, but from profound systemic weaknesses that prevent their execution, thereby endangering healthcare workers and communities. Closing this gap requires a multi-faceted strategy: earmarked and timely budgetary allocations for infection prevention and control at state and local government levels; mandatory, regular, and

practical training for healthcare workers; and strengthened supportive supervision and monitoring within the primary healthcare system. Lassa fever, infection prevention and control, primary healthcare, health systems, Nigeria, health security This commentary consolidates fragmented evidence on implementation barriers into a coherent analysis, providing targeted recommendations for policymakers and health managers to strengthen frontline defences in resource-constrained settings.
